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EIGHTH ANNUAL REPORT

OF THE

STATE BOARD OF INSANITY

OF THE

Commonwealth of Massachusetts,

FOR THE

YEAR ENDING NOVEMBER 30, 1906.



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Commonwealth of Massachusetts.

STATE BOARD OF INSANITY.

To His Excellency the Governor and the Honorable Council.

The State Board of Insanity respectfully submits its eighth annual report, for the year ending Sept. 30, 1906, relative to general matters, but for the period beginning Oct. 1, 1905, and ending Nov. 30, 1906, relative to financial operations.

The special classes under its supervision are the insane, the feeble-minded, the epileptic, and, in part, the inebriate.

The whole number of persons under supervision Oct. 1, 1906, was 12,388, being 274 more than the previous year, distributed in classes as follows:—

TABLE 1. — *Classes of Persons under Supervision.*

	NUMBER OCT. 1, 1906.			INCREASE OVER PREVIOUS YEAR.					Average Increase, Five Years.
	Males.	Females.	Totals.	1906.	1905.	1904.	1903.	1902.	
Insane,	4,940	5,431	10,371	219	217 ¹	362 ¹	352 ¹	484 ¹	327 ¹
Feeble-minded,	819	568	1,387	56	177	95 ²	86	97	64
Epileptic (sane),	197	162	359	37	33	25	34	32	32
Inebriate,	113	23	136	34 ²	11 ²	4	35 ²	21 ²	19 ²
Totals,	6,069	6,184	12,253	278	416	296	437	592	404
Other classes,	49	80	129	4 ²	5	2	82	174 ²	18 ²
Aggregates,	6,121	6,267	12,388	274	421	298	519	418	386

¹ Exclusive of almshouse cases.

² Decrease.

THE INSANE UNDER CARE

Oct. 1, 1906, numbered 10,371, being 1 insane patient to every 295 persons of the estimated population of the State. In addition, there were 640 unrecovered insane who were temporarily

absent from institutions, and at least as many others who had been discharged.

The number, increase and location of the insane under care are shown as follows: —

TABLE 2. — *Number, Increase and Location of Insane under Care.*

	NUMBER OCT. 1, 1906.			INCREASE OVER PREVIOUS YEARS.					Average Increase, Five Years.	Average Increase, Ten Years.
	Males.	Females.	Totals.	1906.	1905.	1904.	1903.	1902.		
Public institutions, . . .	4,826	5,000	9,826	172	174 ¹	300 ¹	332	468	289	339
Family care, . . .	13	272	285	32	40	54	35	7	34	16
Total public, . . .	4,839	5,272	10,111	203	214	354	367	475	323	355
Private institutions, . . .	101	159	260	15	3	8	15 ²	9	4	4
Total public and private,	4,940	5,431	10,371	219	217	362	382	484	327	359

¹ Exclusive of transfers from almshouses.

² Decrease.

THE INCREASE OF THE INSANE

under care for the year was 219, compared with 217 the previous year, 327, the average annual increase for the last five years, and 359, for the last ten years.

In public institutions the increase was 172, compared with 174 the previous year, 289, the average annual increase for the last five years, and 339, for the last ten years.

In family care the increase was 32, compared with 40 the previous year, 34, the average annual increase for the last five years, and 16 for the last ten years.

In private institutions the increase was 15, compared with 3 the previous year, 4, the average annual increase for the last five years, and 4, for the last ten years.

THE INCREASE OF ACCUMULATION OF THE INSANE

in public institutions is observed to be 2 less than the previous year, but 167 less than the average for ten years. This decrease of nearly one-half is probably largely accidental, from causes not apparent but operating irregularly, as evidenced by the marked variation of such figures over a series of years, and cannot be expected to continue. In part, however, the withdrawal of an increasing number of patients for family care

accounts for the decline; so also the extension of the period of temporary absences from sixty days to six months, facilitating the longer stay of patients with their friends; *e.g.*, 315 patients were absent on visit at the end of last year, whereas 562 are on visit this year. The lengthening of the visit largely explains such marked increase by continuing in this status many who would otherwise have been discharged at the expiration of the shorter period of sixty days, but the general opinion of the hospital men is that the tendency has been to prolong the patient's stay at home.

It is probable that the present general prosperity tends to diminish the inflow of patients into institutions by furnishing work which in dull times might not be available for an indifferent class of labor, and, by affording a larger and steadier income to the bread winner of the family, increasing the ability to care for dependents.

THE INFLOW TO PUBLIC INSTITUTIONS

has been less than the previous year, being 3,609, compared with 3,725; whereas the outflow has been greater, being 3,437, against 3,340. Dismissals to family care were 8 less; to other institutions, 219 more; to deportation by the United States Immigration Service, 2 less; by the State Board, 6 more; escapes were 20 less; recoveries, 146 less; deaths, 104 less. Hence, involuntary dismissals were 55 less than the previous year, whereas all dismissals were 97 more, indicating a more liberal tendency in releasing the unrecovered insane at the request of their friends or through the initiative of hospital physicians. Should such tendency continue, its effect in diminishing accumulation of patients in institutions would be most important, because increase in accumulation is due more to lower discharge rate than to higher admission rate; *e.g.*, the admission rate during the last twenty-five years has increased 84 yearly, whereas the accumulation rate has increased 270 yearly, or 3.21 times as fast.

INSANE COMMITMENTS

for the year numbered 2,694, 230 less than the previous year. The shrinkage is due to 117 fewer first commitments and 113 fewer recommitments, owing probably to the legislation of last

year extending the period of temporary absences from sixty days to six months, and permitting counties to pay transportation charges for returning patients from visit without new commitment. The percentage of first commitments to any hospital is 78.58, against 76.5 the previous year.

Admissions of voluntary patients were 189, an increase of 84 over the previous year. Sixty-one voluntary patients were received in public institutions, an increase of 24, or 65 per cent. One hundred and twenty voluntary patients were insane, of whom only 11 required subsequent commitments as such.

Emergency commitments were 51, a decrease of 30 from the previous year. Forty-nine were duly committed within the five days' limit, and 2 were received as voluntary patients.

FIRST CASES OF INSANITY

show a falling off, in harmony with the decrease of all admissions during the year. They numbered 2,120, 117 less than the previous year. One new case of insanity appeared from every 1,443 of the estimated general population, in comparison with 1,363, the average from 1900 to 1905. The growth of population would account for the appearance of an increase of 38 new cases, so that this decrease must be regarded as exceptional, but probably within the limit of normal variation from year to year, although on the average there is a progressive increase, probably somewhat in excess of the rate of increase of the general population.

THE NATIVITY

of the insane received for the first time in any public institution or the McLean Hospital agrees substantially with the percentages of previous years, although there is a slight increase in the ratio of foreign born.

Exclusive of 17, or 0.82 per cent., whose birthplaces were unknown, 770, or 37.37 per cent., were born in Massachusetts; 982, or 47.67 per cent., in New England; 1,107, or 53.73 per cent., in United States; 953, or 46.26 per cent., in foreign countries.

THEIR PARENTAGE

likewise differs little from previous years.

Exclusive of 119, or 5.73 per cent., whose birthplaces were unknown, 347, or 17.72 per cent., of the mothers were born in Massachusetts; 557, or 28.45 per cent., in New England; 637, or 32.53 per cent., in United States; 1,321, or 67.47 per cent., in foreign countries.

Exclusive of 112, or 5.39 per cent., whose birthplaces were unknown, 324, or 16.48 per cent., of the fathers were born in Massachusetts; 549, or 27.94 per cent., in New England; 624, or 31.75 per cent., in United States; 1,341, or 68.24 per cent., in foreign countries.

THEIR AGES

vary slightly from the average of the previous year. The age of 60 or more had been reached by 442, or 21.46 per cent., when admitted for hospital treatment; by 334, or 17.92 per cent., when insanity began. The mean age was 43.35 years on admission; 40.08 years at the onset of mental disease.

THE LOCALITIES

from which 1,643, or 79.1 per cent., were sent to hospitals were cities or towns of over 10,000 inhabitants, whose percentage of the general population is 75.08; 434, or 20.90 per cent., came from country districts, whose percentage of the general population is 24.92. The ratio of development of insanity in cities and large towns is thus shown to have been somewhat in excess of that in country districts.

THE CAUSES OF INSANITY

assigned by the physicians of the hospital were physical in 1,356, or 65.29 per cent.; mental in 132, or 6.35 per cent.; unknown in 589, or 28.36 per cent.

Congenital causes were assigned in 4.52 per cent.; heredity alone in 9.68 per cent., with other causes, 13.43 per cent., making heredity a causative factor in 23.11 per cent., alcoholic intemperance alone in 16.08 per cent., with other causes, 5.58

per cent., making alcohol a causative factor in 21.66 per cent.; senility in 14.49 per cent.; coarse brain lesions in 4.19 per cent.; syphilis in 4.24 per cent. These six causes were operative in 72.21 per cent. of this year's first cases of insanity.

THE CURABILITY OF MENTAL DISEASE

of this year's first cases was less than usual. Based on the nature of mental disease, 421, or 20.88 per cent., were classed as curable (Group A, Table XIII.), for whom, according to the outcome in 1,120 cases, the expectation of recovery would be 1 chance in 2.07.

Eight hundred and thirty-five, or 41.42 per cent., were practically incurable (Group B), for whom, according to the outcome in 1,476 cases, the expectation of recovery would be 1 chance in 36.

Seven hundred and sixty, or 37.7 per cent., were classed as incurable (Group C), for whom, according to the outcome in 1,548 cases, there would be 1 chance in 1,548.

Hence, the general conclusion may be drawn that hardly more than 1 patient out of 5 had at the time of beginning hospital treatment more than a reasonable hope of recovery from the nature of his mental disease.

This conclusion is confirmed by the duration of mental disease prior to hospital treatment, which was more than a year in 45.66 per cent. of first cases, whose expectation of recovery, according to the outcome in 1,700 cases, would be 1 chance in 40.48. Such duration was less than one year in 54.34 per cent., who had 1 chance in 4.46, according to the outcome of 2,108 cases; it was less than six months in 44.08 per cent., which had 1 chance in 3.97, according to the outcome of 1,729 cases.

Analysis of 515 first recoveries shows that 73.4 per cent. had previous duration of mental disease of less than three months; 84.66 per cent. less than six months; 91.84 per cent. less than one year; and only 8.16 per cent. more than one year. The whole duration of insanity was less than three months in 25 per cent.; less than six months in 52 per cent.; less than one year in 77 per cent.

CERTAIN FORMS OF MENTAL DISEASE

are notable in frequency. Manic depressive insanity occurred in 10.42 per cent. of this year's first cases of insanity, in 49.88 per cent. of curable forms (Group A, Table XIII.); acute alcoholic insanity in 6.99 per cent. of first cases, and 33.49 per cent. of curable forms. These two forms together constituted 17.41 per cent. of first cases, 83.37 per cent. of curable forms, and furnished 76.83 per cent. of first recoveries.

Among the generally incurable forms, dementia præcox occurred in 24.20 per cent. of first cases; chronic alcoholic insanity in 6.55 per cent.; imbecility in 4.51 per cent.; senile insanity in 15.43 per cent.; epileptic insanity in 2.58 per cent.; general paralysis in 10.02 per cent.; coarse brain lesions in 5.16 per cent. These seven forms total 68.45 per cent. of first cases, and furnished only 5.28 per cent. of first recoveries. Should the above two curable forms be added, the nine together would comprise 85.86 per cent. of first cases of insanity.

THE RECOVERY RATE OF THE INSANE

in the State is about 1 per cent. less than the previous year, owing in part to the less favorable character of commitments. It has been shown that the nature of mental disease at the time of admission indicated that almost 4 out of every 5 new patients were practically incurable, and that hardly more than one-half of the curable actually recovered in a series of 1,120 first cases.

An accidental factor lowers this rate considerably, inasmuch as the law extending the trial visit from sixty days to six months was not in full operation last year, as it has been this year, so that some recoveries which would formerly have been counted at the end of sixty days have been carried to next year by the extension of the probationary period. The general effect of this law will tend to diminish the recovery rate, because some will relapse within six months who would have successfully passed the sixty days' limit.

Furthermore, the standard of recovery has progressively risen with the closer study of insanity and the application of scientific methods of diagnosis. Fifty years ago the recovery rate in

Massachusetts insane hospitals was 44.7 per cent., which has steadily diminished to this year's rate of 13.10 per cent. of commitments.

The number of all recoveries in the State this year was 353, compared with 483, or 14.28 per cent., the previous year.

The percentages of recoveries in public institutions and McLean Hospital are:—

On commitments,	12.65; five years' average, 15.15
On whole number of persons, . .	2.67; five years' average, 3.60
On daily average number, . . .	3.37; five years' average, 4.69

There were 248 recoveries of first cases of insanity, being 11.94 per cent. of such, compared with 15.35 per cent. the previous year, and with 13.70, a five years' average.

In the presentation on a later page of the tabulation of percentages of recoveries in the different hospitals there is no thought of indicating the comparative quality or success of different methods of treatment. Evidently this must depend on many conditions, and have a more secure foundation than a relative number of recoveries, which can but express an opinion at the best, variable according to the idiosyncrasies of the individual physician and with the standard of cure which he may adopt.

The wide variation in recovery rates of different hospitals in every State and country, both at a given time and at successive periods, tends to weaken confidence in their value without careful study of collateral data. This is well illustrated by the recovery rates in Massachusetts State hospitals, ranging from 44.7 per cent. fifty years ago, 41.89 per cent. forty years ago, 24 per cent. thirty years ago, 22.57 per cent. twenty years ago, 18.58 per cent. ten years ago, down to 16.33 per cent. in 1905, although there has been progressive and marked improvement of conditions and methods of treatment of the insane during this period. Nevertheless, such information is persistently sought and such comparisons will be made, and, if made, the more uniform the basis the better.

There is general interest in the character of the patients passing through the hospitals and in the results of mental disease. The medical profession would like to know what pro-

portion escape without appreciable brain damage, as in the main denoted by the present use in Massachusetts of the term "recovery." The general public are more concerned to learn how many insane patients are restored to a condition enabling them to take their places in the community and be self-maintaining, and with what permanency they continue to hold their posts of usefulness. The Board is steadily gathering information bearing on these questions, which will be presented in comparative form and extended gradually over considerable periods of time, in the hope that errors of judgment made at the outset may be corrected by the subsequent history of patients.

Although a patient may not recover without brain damage, he may be able to leave the hospital in such improved mental health as to be suitable for life in the community and capable of earning a living.

Such unrecovered, capable of self-support, were discharged this year to the number of 215, or 7.98 per cent. on commitments. Should these be added to the recovered,

ALL PATIENTS DISCHARGED CAPABLE OF SELF-SUPPORT
would number 568, or 21.08 per cent. of commitments.

THE DEATH RATE OF THE INSANE
during the year was 77 per thousand of the whole number of persons treated, compared with 84.6 in 1905, 81.1 in 1904 and 75.2 in 1903.

The percentages of deaths in public institutions and McLean Hospital are: —

On whole number of persons, .	7.78; five years' average, 7.85
On daily average number, .	9.80; five years' average, 10.21
On discharges and deaths, .	45.51; five years' average, 38.41

Curable mental disease was present in 8.32 per cent. of persons who died, compared with 11.69 the previous year.

The percentage of deaths occurring within the first three months of hospital residence was 28.52, against 30.2 in 1905, 28.16 in 1904.

Senile insanity was present in 24.95 per cent., general paralysis in 19.71 per cent., coarse brain lesions in 9.03 per cent.

These incurable brain conditions amounted to 53.69 per cent., compared with 50.82 per cent. the previous year.

Tuberculosis was present in 15.19 per cent., compared with 14.27 per cent. the previous year.

Pneumonia (lobar, broncho and hypostatic) was present in 16.32 per cent., organic disease of the heart in 11.7 per cent., organic disease of the kidneys in 2.26 per cent., malignant tumors in 1.95 per cent.

The statistical data on which the foregoing statements and conclusions are based are found in the following tables: —

TABLE 3. — *Relative to First Cases of Insanity in Public Institutions and McLean Hospital.*

INSANE COMMITMENTS.			FIRST CASES OF INSANITY — PERCENTAGES.									
INSANE HOSPITALS.			NATIVITY.									
All.	First to Any Hospital.	PERCENTAGE OF FIRST CASES OF INSANITY.		PATIENTS.				MOTHERS NATIVE.		FATHERS NATIVE.		
		1906.	Average Two Years, 1905-1906.	Massachusetts.		Native.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	
				1906.	Average Two Years, 1905-1906.							
Worcester,	433	348	80.37	79.49	35.19	34.92	48.97	49.48	26.01	27.64	23.46	26.59
Taunton,	429	331	77.15	75.77	30.88	33.40	43.12	46.64	25.16	29.55	25.08	27.82
Northampton,	254	198	77.95	76.47	40.61	42.08	64.46	62.00	41.96	41.58	41.45	41.57
Danvers,	520	406	78.08	76.39	40.24	39.85	53.82	54.67	34.08	34.29	32.66	34.64
Westborough,	335	307	77.72	76.92	43.46	42.67	62.42	60.72	42.21	41.77	43.34	42.22
Boston Insane,	298	250	83.89	81.77	38.00	39.71	50.80	52.34	23.48	25.44	23.58	24.40
Insane Wards, State Hospital, .	68	62	91.18	91.80	22.95	23.77	37.70	39.34	25.92	22.76	24.07	24.29
Asylum for Insane Criminals, .	88	72	81.81	87.67	28.16	29.59	42.25	49.28	17.91	19.42	17.39	20.45
Other public institutions, . . .	35	16	45.71	44.80	43.75	46.87	68.75	70.48	25.00	31.94	25.00	34.72
Totals and averages, public,	2,520	1,990	78.97	77.97	37.13	37.81	52.42	53.32	31.10	32.18	30.42	31.81
McLean,	120	87	72.50	69.27	43.02	46.86	83.72	82.00	67.53	65.21	64.10	60.73
Totals and averages, public and McLean,	2,640	2,077	78.67	77.61	37.37	38.13	53.73	54.40	32.53	33.34	31.75	32.84

TABLE 3. — *Relative to First Cases of Insanity in Public Institutions and McLean Hospital — Continued.*

FIRST CASES OF INSANITY — PERCENTAGES — CON.									
COMMITTED FROM					AGE.				
INSANE HOSPITALS.	CITIES AND TOWNS OVER 10,000, 75 PER CENT. STATE POPULATION.		COUNTRY DISTRICTS, 25 PER CENT. STATE POPULATION.		60 YEARS OR OVER.		AVERAGE AGE.		
	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	
Worcester,	79.60	78.20	20.40	21.79	17.10	16.98	41.10	41.65	
Taunton,	71.00	70.38	29.00	29.61	21.58	22.88	43.90	44.11	
Northampton,	80.30	77.03	19.70	22.96	22.22	23.55	44.70	44.40	
Danvers,	83.25	70.53	16.75	29.46	25.25	21.89	44.11	43.71	
Westborough,	66.45	70.22	33.55	29.57	15.96	20.36	43.17	43.90	
Boston Insane,	98.80	99.24	1.20	.75	30.00	27.61	45.08	45.95	
Insane Wards, State Hospital,	88.71	83.70	11.29	16.30	30.64	25.97	45.90	45.00	
Asylum for Insane Criminals,	75.00	75.00	25.00	25.00	4.83	2.99	34.80	33.25	
Other public institutions,	62.50	67.36	37.44	32.61	12.50	9.02	35.00	33.05	
Totals and averages, public,	79.35	77.20	20.65	22.79	21.49	21.22	43.22	43.27	
McLean,	73.56	74.28	26.44	25.72	20.69	23.53	45.20	46.18	
Totals and averages, public and McLean,	79.10	77.08	20.90	22.92	21.46	21.29	43.35	44.31	

TABLE 3. — *Relative to First Cases of Insanity in Public Institutions and McLean Hospital* — Continued.

INSANE HOSPITALS.	FIRST CASES OF INSANITY — PERCENTAGES — CON.							
	DURATION PRIOR TO COMMITMENT.							
	1 YEAR OR MORE.		UNDER 1 YEAR.		UNDER 6 MONTHS.		UNDER 3 MONTHS.	
	1906.	Average Two Years, 1903-1906.	1906.	Average Two Years, 1903-1906.	1906.	Average Two Years, 1903-1906.	1906.	Average Two Years, 1903-1906.
Worcester,	44.30	40.31	55.70	59.68	47.88	51.43	37.46	40.75
Taunton,	43.37	45.43	56.63	54.56	43.01	44.17	31.18	32.91
Northampton,	51.17	55.46	45.83	44.53	38.02	36.57	28.64	28.50
Danvers,	54.35	50.87	45.65	49.12	37.47	40.65	27.17	31.80
Westborough,	34.39	33.62	65.61	66.37	55.73	57.93	43.87	45.01
Boston Insane,	45.07	44.58	54.93	55.41	42.72	42.88	26.48	29.21
Insane Wards, State Hospital,	60.34	60.17	39.66	39.83	18.96	21.98	10.34	11.42
Asylum for Insane Criminals,	40.98	41.32	59.02	58.67	54.10	49.07	44.26	35.82
Other public institutions,	15.38	7.69	84.62	92.31	84.61	70.08	53.85	38.03
Totals and averages, public,	46.27	44.91	53.73	55.08	43.82	45.37	32.93	34.57
McLean,	33.33	40.27	66.67	59.72	49.43	44.15	33.33	29.16
Totals and averages, public and McLean,	45.66	44.68	51.34	55.32	44.08	45.36	32.95	34.37

TABLE 3. — *Relative to First Cases of Insanity in Public Institutions and McLean Hospital — Continued.*

INSANE HOSPITALS.	FIRST CASES OF INSANITY — PERCENTAGES — Con.									
	CAUSES ASSIGNED BY HOSPITAL PHYSICIANS — Con.									
	COARSE BRAIN LESIONS.		ALCOHOLIC INTEMPERANCE.		ALCOHOLIC INTEMPERANCE AND OTHER CAUSES.		TOTAL ALCOHOLIC INTEMPERANCE.		SYPHILIS.	
	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.
Worcester,	2.59	3.83	20.40	25.70	11.49	7.80	31.90	33.51	6.32	6.64
Taunton,	1.21	2.74	11.18	16.55	3.02	4.18	14.20	20.73	5.13	7.38
Northampton,	4.04	3.74	20.71	21.43	4.54	6.70	25.25	28.14	.50	4.19
Danvers,	6.65	8.66	17.49	22.18	5.91	7.50	23.40	29.68	5.66	6.78
Westborough,	6.19	5.50	15.31	15.24	5.21	3.34	20.52	18.59	3.91	3.62
Boston Insane,	4.00	6.47	9.60	13.48	.40	2.30	10.00	15.78	1.20	4.81
Insane Wards, State Hospital,	-	-	11.29	14.41	12.90	18.73	24.19	33.14	6.43	5.85
Asylum for Insane Criminals,	2.77	1.89	36.11	46.05	11.11	13.55	47.22	59.66	4.17	4.09
Other public institutions,	-	-	-	-	-	-	-	-	-	-
Totals and averages, public,	3.97	4.81	16.28	20.27	5.83	6.18	22.11	26.45	4.27	5.57
McLean,	9.19	13.93	11.49	11.99	-	1.04	11.49	13.03	3.45	7.98
Totals and averages, public and McLean,	4.19	5.11	16.08	19.99	5.58	5.99	21.66	25.99	4.24	5.64

TABLE 3. — *Relative to First Cases of Insanity in Public Institutions and McLean Hospital — Continued.*

FIRST CASES OF INSANITY — PERCENTAGES — CON.										
FORMS OF MENTAL DISEASE.										
PERSONS TO FIRST CASES.										
	Generally Incurable. ¹									
	Curable. ¹		B.		C.		B and C.			
	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.
INSANE HOSPITALS.										
Worcester,	22.03	30.26	47.24	40.74	30.73	28.99	77.96	69.73		
Taunton,	14.20	20.81	52.47	44.46	33.33	34.72	85.80	79.18		
Northampton,	17.68	24.17	35.35	31.00	46.97	44.81	82.32	75.82		
Danvers,	26.26	34.65	32.09	26.60	41.65	38.74	73.73	65.33		
Westborough,	17.61	22.70	52.16	42.21	30.23	35.08	82.39	77.29		
Boston Insane,	17.55	21.99	36.33	33.92	46.12	44.07	82.45	78.00		
Insane Wards, State Hospital,	17.74	17.06	20.97	21.96	61.29	60.97	82.26	82.93		
Asylum for Insane Criminals,	15.49	28.43	63.38	51.23	21.13	20.33	84.51	71.56		
Other public institutions,	-	-	-	-	100.00	100.00	100.00	100.00		
Totals and averages, public,	19.29	25.93	42.70	36.50	38.01	37.56	80.71	74.06		
McLean,	61.04	51.48	9.09	16.64	29.87	31.87	38.96	48.51		
Totals and averages, public and McLean,	20.88	26.86	41.42	35.77	37.70	37.37	79.12	73.14		

¹ See Table XIII. of Appendix.

TABLE 3. — *Relative to First Cases of Insanity in Public Institutions and McLean Hospital — Continued.*

INSANE HOSPITALS.		FIRST CASES OF INSANITY — PERCENTAGES — CON.									
		FORMS OF MENTAL DISEASE — CON.									
		RECOVERIES TO FIRST RECOVERIES.				MANIC DEPRESSIVE INSANITY.			ACUTE ALCOHOLIC INSANITY.		
		Curable. ¹		Generally Incurable. ¹		B and C.		Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.
		1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.	1906.	Average Two Years, 1905-1906.				
Worcester, . . . . .	.	95.00	95.27	5.00	4.73	10.72	10.24	6.96	11.25		
Taunton, . . . . .	.	94.45	94.72	5.55	5.27	5.86	7.79	6.17	6.55		
Northampton, . . . . .	.	100.00	100.00	-	-	8.59	12.76	7.58	7.12		
Danvers, . . . . .	.	100.00	99.30	-	.69	10.61	15.45	11.41	11.26		
Westborough, . . . . .	.	75.55	78.07	24.45	21.92	6.64	9.87	7.97	6.39		
Boston Insane, . . . . .	.	96.00	98.00	4.00	2.00	11.43	8.26	3.67	1.84		
Insane Wards, State Hospital, . . . . .	.	80.00	90.00	20.00	10.00	11.29	8.92	-	-		
Asylum for Insane Criminals, . . . . .	.	100.00	100.00	-	-	7.04	5.82	2.82	9.46		
Other public institutions, . . . . .	.	-	37.50	100.00	62.50	-	-	-	-		
Totals and averages, public, . . . . .	.	91.59	92.32	8.41	7.48	8.92	10.36	7.06	7.55		
McLean, . . . . .	.	100.00	93.75	-	6.25	48.05	41.77	5.19	4.21		
Totals and averages, public and McLean, . . . . .	.	92.28	92.71	7.72	7.29	10.42	11.48	6.99	7.44		

¹ See Table XIII. of Appendix.

TABLE 3. — *Relative to First Cases of Insanity in Public Institutions and McLean Hospital — Concluded.*

INSANE HOSPITALS.		FIRST CASES OF INSANITY — PERCENTAGES — Con.					
		FORMS OF MENTAL DISEASE — Con.					
		EPILEPTIC INSANITY.		IMBECILITY.		SENILE INSANITY.	
		1906.	Average Two Years, 1903-1906.	1906.	Average Two Years, 1903-1906.	1906.	Average Two Years, 1903-1906.
Worcester, . . . . .	. . . . .	1.45	2.35	2.32	2.25	12.17	10.33
Taunton, . . . . .	. . . . .	2.47	3.31	2.16	1.77	13.88	14.05
Northampton, . . . . .	. . . . .	3.03	2.62	13.13	12.78	19.70	18.73
Danvers, . . . . .	. . . . .	2.12	2.03	6.10	5.68	13.26	10.93
Westborough, . . . . .	. . . . .	1.99	1.63	1.99	3.23	14.28	16.88
Boston Insane, . . . . .	. . . . .	—	.31	2.04	2.77	26.94	23.97
Insane Wards, State Hospital, . . . . .	. . . . .	3.23	3.25	17.74	16.24	27.42	24.36
Asylum for Insane Criminals, . . . . .	. . . . .	1.41	1.85	5.63	9.13	4.23	2.68
Other public institutions, . . . . .	. . . . .	100.00	100.00	—	—	—	—
Totals and averages, public, . . . . .	. . . . .	2.68	2.91	4.64	4.86	15.73	14.81
McLean, . . . . .	. . . . .	—	—	1.30	.65	7.79	7.92
Totals and averages, public and McLean, . . . . .	. . . . .	2.58	2.81	4.51	4.72	15.43	14.57

TABLE 4. — *Relative to Recoveries of the Insane in Public Institutions and McLean Hospital.*

INSANE HOSPITALS.		Number.	PERCENTAGE OF ALL RECOVERIES OF INSANE ON					
			COMMITMENTS.		WHOLE NUMBER OF PERSONS.		DAILY AVERAGE NUMBER.	
			1906.	Average Five Years, 1902-1906.	1906.	Average Five Years, 1902-1906.	1906.	Average Five Years, 1902-1906.
Worcester,	. . . . .	76	17.55	19.45	4.63	6.27	6.59	9.51
Taunton, . . . . .	. . . . .	30	6.99	13.16	2.22	4.10	3.20	6.13
Northampton, . . . . .	. . . . .	29	11.42	12.08	2.82	3.23	3.78	4.51
Danvers, . . . . .	. . . . .	46	8.85	11.93	2.42	3.25	3.56	4.72
Westborough, . . . . .	. . . . .	55	13.92	19.07	4.17	5.88	6.26	8.76
Boston, . . . . .	. . . . .	30	10.07	10.94	2.89	3.96	4.28	6.25
Insane Wards, State Hospital, . . . . .	. . . . .	7	10.29	6.63	1.02	.92	1.30	.98
Asylum for Insane Criminals, . . . . .	. . . . .	21	23.86	16.21	3.44	2.48	3.89	2.85
Other public institutions, . . . . .	. . . . .	2	5.71	10.07	.06	.10	.68	.23
Totals and averages, public,	. . . . .	296	11.75	14.47	2.41	3.36	3.03	4.36
McLean, . . . . .	. . . . .	38	31.67	28.42	12.38	11.74	20.56	20.95
Totals and averages, public and McLean,	. . . . .	334	12.65	15.15	2.67	3.60	3.37	4.69

TABLE 4. — *Relative to Recoveries of the Insane in Public Institutions and McLean Hospital — Continued.*

FIRST CASES OF INSANITY.									
INSANE HOSPITALS.	RECOVERIES.			CURABLE CASES — GROUP A.					
	Number.	PERCENTAGE OF FIRST CASES.		Number.	PERCENTAGE OF FIRST CASES.		Number.	RECOVERIES.	
		1906.	Average Five Years, 1902-1906.		1906.	Average Two Years, 1905-1906.		1906.	Average Two Years, 1905-1906.
Worcester,	60	17.24	19.06	76	21.84	30.12	57	75.00	65.42
Taunton,	18	5.44	10.95	46	13.90	19.65	17	36.96	42.53
Northampton,	20	10.10	9.12	35	17.68	24.17	20	57.14	45.96
Danvers,	36	8.87	11.95	99	24.38	32.37	36	36.37	41.08
Westborough,	45	14.65	20.45	53	17.26	21.89	34	64.15	63.10
Boston,	25	10.00	8.34	43	17.20	21.52	24	55.81	35.73
Insane Wards, State Hospital,	5	8.06	5.20	11	17.74	17.06	4	36.37	23.18
Asylum for Insane Criminals,	15	20.83	17.41	11	15.28	28.32	15	—	80.86
Other public institutions,	2	12.50	2.50	—	—	—	—	—	—
Totals and averages, public,	226	11.36	13.38	374	18.79	25.14	207	55.35	49.88
McLean,	22	25.29	23.60	47	54.02	45.06	20	42.55	48.19
Totals and averages, public and McLean,	248	11.94	13.70	421	20.27	25.96	227	53.92	49.34

TABLE 4. — *Relative to Recoveries of the Insane in Public Institutions and McLean Hospital — Concluded.*

INSANE HOSPITALS.	FIRST CASES OF INSANITY — CON.					
	MANIC DEPRESSIVE INSANITY.			ACUTE ALCOHOLIC INSANITY.		
	Number.	PERCENTAGE OF FIRST CASES.		Number.	PERCENTAGE OF FIRST CASES.	
		1906.	Average Two Years, 1903-1906.		1906.	Average Two Years, 1903-1906.
Worcester,	37	10.72	10.24	24	6.96	11.25
Taunton,	19	5.86	7.79	20	6.17	6.55
Northampton,	17	8.53	12.76	15	7.58	7.12
Danvers,	40	10.61	15.45	43	11.41	11.26
Westborough,	20	6.64	9.87	24	7.97	6.39
Boston,	28	11.43	8.26	9	3.67	1.84
Insane Wards, State Hospital,	7	11.29	8.92	-	-	-
Asylum for Insane Criminals,	5	7.04	5.82	2	2.82	9.46
Other public institutions,	-	-	-	-	-	-
Totals and averages, public,	173	8.92	10.36	137	7.06	7.55
McLean,	37	48.05	41.77	4	5.19	4.21
Totals and averages, public and McLean,	210	10.42	11.48	141	6.99	7.44

TABLE 5. — *Relative to Deaths of the Insane in Public Institutions and McLean Hospital.*

INSTITUTIONS.	Number of Deaths.	PERCENTAGE OF DEATHS ON					
		WHOLE NUMBER OF PERSONS.		DAILY AVERAGE NUMBER.		DISCHARGES AND DEATHS.	
		1906.	Average Three Years, 1904-1906.	1906.	Average Three Years, 1904-1906.	1906.	Average Three Years, 1904-1906.
Insane hospitals:—							
Worcester,	136	8.28	8.46	11.79	12.41	40.96	38.20
Taunton,	106	7.86	8.67	11.31	13.05	39.40	40.62
Northampton,	73	7.10	6.64	10.83	9.88	25.00	32.52
Danvers,	174	9.15	8.77	13.47	12.84	46.15	40.47
Westborough,	92	6.98	8.45	10.47	12.70	38.02	37.58
Boston,	126	12.15	11.77	17.96	18.35	49.80	47.69
Totals and averages,	707	8.61	8.75	12.34	12.93	40.06	39.34
Insane asylums:—							
Worcester,	53	5.86	5.78	7.01	6.49	92.98	95.36
Medfield,	73	4.66	5.05	4.79	5.38	86.90	86.71
State Colony,	6	1.36	.81	1.85	1.22	46.15	27.88
Totals and averages,	132	4.56	4.90	5.07	5.48	85.71	87.34
Hospitals and asylums,	839	7.79	7.89	10.07	10.71	43.72	45.83
Miscellaneous:—							
Insane Wards, State Hospital,	65	9.49	13.93	12.06	17.73	75.58	79.69
Asylum for Insane Criminals,	23	3.77	3.51	4.26	4.05	28.39	32.06
Hospital for Epileptics,	17	5.34	4.72	6.20	5.37	65.38	62.12
Foxborough State Hospital,	13	9.62	3.20	18.49	6.16	86.67	28.89
Totals and averages, public,	957	7.82	8.21	9.81	10.61	44.99	44.85
McLean,	17	5.54	6.09	9.20	10.38	15.04	17.07
Totals and averages, public and McLean,	974	7.78	8.17	9.80	10.61	45.51	44.18

TABLE 5. — *Relative to Deaths of the Insane in Public Institutions and McLean Hospital — Continued.*

		PERCENTAGE OF PERSONS WHO DIED AFFECTED WITH CERTAIN MENTAL DISEASES.						
INSTITUTIONS.		Average Two Years, 1905-1906.	Senile Insanity.	Average Two Years, 1905-1906.	General Paralysis.	Average Two Years, 1905-1906.	Coarse Brain Lesions.	Average Two Years, 1905-1906.
Insane hospitals: —								
Worcester,		11.76	28.67	25.56	25.74	26.20	10.29	9.49
Taunton,		9.43	25.47	26.84	25.30	24.23	9.43	8.34
Northampton,		10.96	36.99	39.38	15.07	13.86	9.59	9.85
Danvers,		10.34	27.59	25.57	22.93	23.56	12.64	11.73
Westborough,		6.46	25.00	29.82	26.09	24.06	14.13	11.78
Boston,		11.11	42.06	40.49	24.60	23.36	8.73	7.90
Totals and averages,		10.18	30.69	30.38	24.19	23.19	10.89	9.91
Insane asylums: —								
Worcester,		—	5.66	8.38	1.87	.93	1.89	.94
Medford,		—	—	—	8.22	5.37	2.74	2.00
State Colony,		—	16.67	8.33	—	16.66	1.66	.83
Totals and averages,		—	3.03	3.48	5.30	3.83	3.03	1.90
Hospitals and asylums,		8.58	26.34	26.34	21.21	20.28	9.65	8.67
Miscellaneous: —								
Insane Wards, State Hospital,		9.23	23.08	21.46	7.69	9.16	4.61	4.43
Asylum for Insane Criminals,		—	13.04	22.29	4.35	10.06	4.35	2.17
Hospital for Epileptics,		—	—	—	—	—	—	—
Foxborough State Hospital,		—	7.07	3.53	15.38	7.69	—	—
Totals and averages, public,		8.15	25.08	25.16	19.43	18.66	8.88	7.97
McLean,		17.65	17.65	18.82	35.29	35.64	17.65	18.82
Totals and averages, public and McLean,		8.32	24.95	25.04	19.71	19.01	9.03	8.19

1 See Table XIII. of Appendix for forms.

TABLE 5. — *Relative to Deaths of the Insane in Public Institutions and McLean Hospital — Concluded.*

INSTITUTIONS.	PERCENTAGE OF PERSONS WHO DIED AFFECTED WITH CERTAIN PHYSICAL DISEASES.									
	Tuber- culosis.	Average Two Years, 1905-1906.	Pneumonia.	Average Two Years, 1905-1906.	Organic Cardiac Disease.	Average Two Years, 1905-1906.	Organic Renal Disease.	Average Two Years, 1905-1906.	Malignant Tumors.	Average Two Years, 1905-1906.
Insane hospitals: —										
Worcester,	12.50	11.21	27.21	29.13	15.44	12.99	2.94	1.78	2.94	3.33
Taunton,	12.26	10.96	10.38	16.48	2.07	1.43	—	—	—	—
Northampton,	9.59	8.59	2.74	3.90	8.22	10.43	1.37	3.21	4.11	6.48
Danvers,	13.22	13.93	29.31	31.53	14.37	13.87	3.45	4.27	1.72	1.49
Westborough,	13.04	12.42	9.78	8.82	11.96	8.73	6.51	6.01	2.17	2.26
Boston,	8.73	8.78	19.05	16.60	3.97	5.96	.79	1.27	2.37	1.18
Totals and averages,	11.74	11.24	18.95	20.05	10.04	9.29	2.54	2.71	2.12	2.24
Insane asylums: —										
Worcester,	16.98	27.37	20.75	21.48	24.53	14.48	1.89	2.05	1.89	2.05
Medfield,	23.29	21.77	2.74	2.00	21.92	17.28	1.37	.68	1.37	3.84
State Colony,	50.00	41.66	—	—	16.67	8.33	—	—	16.67	8.33
Totals and averages,	21.97	24.37	9.85	9.25	22.73	16.08	1.51	1.14	2.27	3.49
Hospitals and asylums,	13.34	13.20	17.52	18.44	12.04	10.35	2.38	2.48	2.14	2.42
Miscellaneous: —										
Insane Wards, State Hospital,	32.31	27.85	9.23	7.09	15.38	22.22	—	1.41	1.54	1.12
Asylum for Insane Criminals,	52.17	36.61	8.69	6.97	4.35	4.80	4.35	2.17	—	5.26
Hospital for Epileptics,	17.65	16.51	5.88	6.78	—	7.69	—	—	—	—
Foxborough State Hospital,	—	—	13.98	7.69	15.30	7.65	—	—	—	—
Totals and averages, public,	15.46	15.03	16.51	16.78	11.91	11.65	2.19	2.36	1.98	2.26
McLean,	—	—	5.88	6.94	—	—	5.88	4.94	—	2.00
Totals and averages, public and McLean,	15.19	14.73	16.32	16.67	11.70	11.42	2.26	2.41	1.95	2.26

CAPACITIES OF INSTITUTIONS.

The comparative ratings of the capacities for patients in institutions have been established on a uniform basis, as set forth in the Board's report of 1905, pages 24-32. Although these ratings will be brought up to date each year and be available for reference at the Board's office, their tabulation in full detail will be published only once in five years. Working capacities, however, in comparison with the number of patients at the close of the year, will appear annually, substantially as presented on a later page.

For the first time in many years there is no overcrowding in the institutions as a whole, although in a few cases a slight degree has supervened in anticipation of the occupancy of a new building or of a transfer to another institution. In the institutions for the insane the number of patients has fallen 406 below the aggregate of rated capacities, being a deficiency of 4.06 per cent. In all the institutions under supervision the deficiency of patients amounts to 594, or 4.97 per cent.

The working capacity, its increase for the year for each institution, in comparison with the number of patients Oct. 1, 1906, and the percentage of excess of patients, are shown in the following table: —

TABLE 6. — *Working Capacities of Institutions, Oct. 1, 1906.*

INSTITUTIONS.	WORKING CAPACITIES.				
	MALE.		FEMALE.		TOTAL.
	Oct. 1, 1906.	Increase for the Year.	Oct. 1, 1906.	Increase for the Year.	
Insane hospitals:—					
Worcester,	611	—	590	—	1,201
Taunton,	504	21	415	21	919
Northampton,	428	—	391	—	819
Danvers,	584	19	768	19	1,352
Westborough,	378	9	541	—	919
Boston,	302	—	434	24	736
Totals,	2,807	38	3,139	41	5,946
Insane asylums:—					
Worcester,	362	61	465	7	827
Medfield,	624	142	882	—	1,506
State Colony,	291	109	121	—	412
Totals,	1,277	245	1,468	7	2,745
Hospitals and asylums,	4,084	273	4,607	48	8,691
Insane Wards, State Hospital,	177	—	386	—	563
Asylum for Insane Criminals,	662	203	—	—	662
Foxborough State Hospital (insane),	87	25	—	—	87
Totals,	926	228	386	—	1,312
Total insane,	5,010	501	4,993	48	10,003
Miscellaneous:—					
Hospital for Epileptics (sane and insane),	353	129	238	—	591
Foxborough State Hospital (inebriate),	95	251	—	—	95
School for the Feeble-minded,	761	155	501	105	1,262
Totals,	1,209	259	739	105	1,948
Aggregates,	6,219	760	5,732	153	11,951

1 Decrease.

TABLE 6. — *Working Capacities of Institutions, Oct. 1, 1906* — Concluded.

INSTITUTIONS.	NUMBER OF PATIENTS OCT. 1, 1906.			EXCESS OF PATIENTS.					
	Males.	Females.	Totals.	MALE.		FEMALE.		TOTAL.	
				Number.	Percentage.	Number.	Percentage.	Number.	Percentage.
In sane hospitals:—									
Worcester,	573	519	1,092	—38	—6.22	—71	—12.03	—109	—9.08
Taunton,	408	445	943	—6	—1.19	30	7.23	24	2.61
Northampton,	393	378	771	—35	—8.18	—13	—3.32	—48	—5.86
Danvers,	33	694	1,227	—51	—8.73	—74	—9.64	—125	—9.25
Westborough,	335	532	927	17	4.50	—9	—1.66	8	.87
Boston,	301	407	708	—1	— .63	—27	—6.22	—28	—3.80
Totals,	2,633	2,975	5,608	—114	—4.06	—164	—5.22	—278	—4.68
In sane asylums:—									
Worcester,	362	478	840	—	—	13	2.80	13	1.57
Medfield,	534	952	1,486	—60	—14.42	70	7.94	—20	—1.33
State Colony,	278	125	403	—13	—4.47	4	3.31	—9	—2.18
Totals,	1,174	1,555	2,729	—103	—8.06	87	5.93	—16	— .58
Hospitals and asylums,	3,867	4,530	8,397	—217	—5.31	—77	—1.67	—294	—3.42
In sane Wards, State Hospital,	182	382	564	5	2.82	—4	—1.04	1	.18
Asylum for Insane Criminals,	524	—	524	—138	—26.85	—	—	—138	—26.85
Foxborough State Hospital (insane),	112	—	112	25	28.74	—	—	25	28.74
Totals,	818	382	1,200	—108	—11.66	—4	—1.04	—112	—8.54
Total insane,	4,685	4,912	9,597	—325	—6.49	—81	—1.62	—406	—4.06
Miscellaneous:—									
Hospital for Epileptics (sane and insane),	253	248	531	—70	—19.83	10	4.20	—60	—10.15
Foxborough State Hospital (feeble-minded),	100	—	100	14	14.75	—	—	14	14.75
School for the Feeble-minded,	668	452	1,120	—68	—12.22	—49	—9.78	—142	—11.25
Totals,	1,060	700	1,760	—149	—12.32	—39	—5.28	—188	—9.65
Aggregates,	5,745	5,612	11,357	—474	—7.62	—130	—2.09	—594	—4.97

Nevertheless, there are some 500 temporary beds made up every night in day spaces requiring removal and storage for the day. Such necessity arises from excess of day over sleeping space, especially in the older hospitals and asylums, and the crowding of certain wards with an excess of patients who do not classify on other wards. The use of temporary beds is objectionable, for hygienic reasons. Their handling taxes the time and strength of nurses, and requires great care to avoid breakage and defacing of buildings. It should be avoided so far as possible by paying greater attention to the distribution of patients on the different wards, which should each have a definite rating of capacity for its class of patients, which should be strictly observed. Excessive day spaces wherever permissible should be converted into permanent dormitories. This has very generally been done in the different institutions. Wherever the evil may not be corrected in these ways, it would be desirable to consider the advisability of making additions to dormitories for this purpose.

EXTENSION OF ACCOMMODATION FOR PATIENTS.

New accommodation, largely in new buildings, has become available during the year, providing for 549 patients in institutions for the insane, 129 for the epileptic, 260 for the feeble-minded.

Work is in progress or appropriations have been granted for buildings which will furnish 583 additional beds for the insane, 100 for the epileptic, 90 for the feeble-minded. A greater part of this provision will become ready for use during the ensuing year.

Although this is a very satisfactory showing, it must be borne in mind that all these classes are constantly on the increase, and that it is necessary to make appropriations two years in advance of the need of buildings, since their construction and furnishing require about that period for completion. This year, however, there is no call for appropriations for new buildings for the insane, except as may be necessary to improve facilities for the better classification and treatment of special classes, as the acute and curable and the excited.

In pursuance of the policy of making adequate provision for

the young epileptic and the feeble-minded, who are still kept in considerable numbers in their homes and elsewhere under unsatisfactory conditions, there is much urgency of the demand for steady and progressive enlargement of accommodation. It is expected that the new School for the Feeble-minded will require a moderate appropriation for the immediate construction of buildings.

THE STANDARD OF SERVICE

in general and particularly on the wards of institutions is lower than desirable, both in quality and tenure. Complaint in this direction is not confined to this State, but is general throughout the country, and commands the serious attention of all interested in the welfare of the insane.

There has always been, as might be expected, difficulty in securing just the right sort of person for a vocation so exacting in its requirements and so unattractive in compensation and prospective advancement as that of nursing in a hospital for the insane; but to recent date it has been overcome in so far that persons of fairly satisfactory character have been found in sufficient number to keep a full quota of nurses, except perhaps during the summer, when vacations are taken and many go away to work at the seashore or in the mountains. For several years the situation has been growing more and more acute, until it has been barely possible at times during the past year to procure respectable persons enough to do absolutely necessary work in caring for patients and safeguarding against danger. It has become quite common for an agent of the institution to spend one day a week in the city employment offices in search of nurses and employees, after exhausting the list of applicants through advertising in the newspapers and otherwise. Inevitably under these conditions rotation in service has been rapid in the extreme, as shown in the following table:—

TABLE 7. — *Rotation of Employees in the Service of Institutions for the Fourteen Months ending Nov. 30, 1906.*

INSTITUTIONS.	WARD SERVICE.				TOTALS.				WHOLE SERVICE.			
	MEN.		WOMEN.		Average Number of Nurses.		Number Different Persons.		Average Number of All Employees.		Number Different Persons employed.	
	Average Number of Nurses.	Number Different Persons.	Rotation.	Average Number of Nurses.	Number Different Persons.	Rotation.	Average Number of Nurses.	Number Different Persons.	Rotation.	Average Number of All Employees.	Number Different Persons employed.	Rotation.
Insane hospitals:—												
Worcester,	55	202	3.7	76	174	2.3	131	376	2.9	259	638	2.5
Taunton,	51	183	3.6	61	169	2.8	112	352	3.1	217	572	2.6
Northampton,	32	102	3.2	37	87	2.4	69	189	2.7	137	320	2.3
Danvers,	60	198	3.3	70	108	2.4	130	368	2.8	246	613	2.5
Westborough,	43	176	4.1	74	139	1.9	117	315	2.7	229	572	2.5
Totals,	241	861	3.6	318	737	2.3	559	1,598	2.9	1,088	2,715	2.5
Insane asylums:—												
Worcester,	34	216	6.4	36	134	3.7	70	350	5.0	160	589	3.7
Medfield,	48	173	3.6	92	239	2.5	140	402	2.9	285	795	2.8
State Colony,	15	83	5.5	8	36	4.5	23	119	5.2	55	177	3.2
Totals,	97	472	4.9	136	399	2.9	233	871	3.7	500	1,561	3.1
Hospitals and asylums,	338	1,333	3.9	454	1,136	2.5	792	2,469	3.1	1,588	4,276	2.7
Miscellaneous:—												
State Hospital,	23	80	3.5	51	118	2.3	74	198	2.7	152	360	2.4
Hospital for Epileptics,	33	102	3.1	29	62	2.1	62	164	2.6	130	314	2.4
Foxborough Hospital,	16	47	2.9	—	—	—	16	47	2.9	46	104	2.3
School for the Feeble-minded,	27	72	2.7	121	325	2.7	148	397	2.7	218	538	2.7
Totals,	99	301	3.0	201	505	2.5	300	806	2.7	546	1,376	2.5
Aggregates,	437	1,634	3.7	655	1,641	2.5	1,092	3,275	3.0	2,134	5,052	2.6

It thus appears that the average length of service of all persons employed was only 5.57 months for all institutions together, being 2.6 rotations in a period of fourteen months. The nurses on the wards averaged 4.91 months, and rotated 3 times during the period; the men nurses, 3.95 months or 3.7 times, the women nurses 5.56 months, 2.5 times.

These averages would be materially lowered if allowance were made for the continuous tenure of most of the physicians and officers, further emphasizing the fact that many employees hardly begin their training before they give place to their successors. There results enormous waste of the energies of officers, who are diverted from the higher functions of administration tending to its improvement to mere routine drill of raw recruits in the most elemental duties, and also of materials and supplies, whose frugal use and saving are best conserved by the careful methods which are possible only through the experience of a stable corps of workers. Hence the adverse consequences appear not only in depreciation of the quality of service, but in economic losses, whose avoidance would go a long way in paying the cost of suitable correctives.

It must be borne in mind that scarcity of help and its embarrassments are not peculiar these busy times to institutions, but hamper more or less all industrial enterprises. Nevertheless, the present emergency merely gives acute emphasis to an old need which has not commanded adequate attention, which should no longer be delayed.

It is to be noted in the above comparisons that rotation in similar services is essentially the same in all institutions, indicating a common underlying cause. It is significant, also, that the frequency of change of women nurses, whose duties are most wearing, keep them confined in-doors, and continue longer each day, is less than the average of outside workers, with shorter hours, greater freedom and only the usual demands of like occupations away from institutions, — conclusive evidence that the peculiar character of institutional work is not the fundamental cause.

On the other hand, there is a quite general feeling among the superintendents that the chief cause arises from the low rate of compensation of institutional employees as a whole, which

has not kept pace with the advance in wages of other employments outside of them. Confirmation may be had by reference to Table X. in the Appendix of the Board's reports, although the whole cost of service has risen from \$1.26 per week in 1903 to \$1.45 in 1906, or 15.1 per cent., comparing averages for hospitals and asylums as typical for all institutions. Such greater total cost is explained by increase in the ratio of employees necessitated by the operation of the eight-hour law of 1906, affecting certain employees off the wards, and the voluntary action of the trustees in shortening the hours of duty for nurses on the wards to a daily average of ten hours.

The relative number of employees has increased 12.81 per cent. during the past four years, and 6 per cent. the past year, whereas the average wage has risen during the same periods respectively only 1.74 per cent. and 2.6 per cent. The disparity between such practically stationary wage scale in institutions and its considerable advance in vocations outside of them is lessened by the inclusion of living expenses in addition to the net sum paid the employee, who is thereby relieved of the burden imposed by higher cost of living, which falls heavily upon the outside worker. However, the present net monthly wage of \$30.40 on the average for officers and employees is too low, and should be gradually raised to a proper standard.

A new complication has been introduced by the recent eight-hour law, which has been variously construed, but in the broadest construction cannot be applied to any but those employed outside the wards, thus unjustly discriminating in favor of those who least need relief. Should the eight-hour standard be maintained, suitable readjustment of time schedules should be made in the interest of nurses and attendants, who are confined longer hours in-doors, in constant association with the insane, in the performance of the most exacting duties. Voluntary action of trustees to this end would be advisable if the necessary funds could be obtained from the Legislature.

Betterment of living and social conditions of employees should receive greater consideration. Of late much has been done in this direction, especially for nurses and attendants, by withdrawing them from bed-rooms opening directly upon the wards into pleasant rooms in separate houses erected for their use.

Little provision, however, has been made for family life, even of assistant physicians and higher officers. Those who desire to marry are obliged to leave the service, or submit to discomforts which in the end become unendurable, as a rule.

The corrective is being attempted in a small way at a few institutions, where inexpensive houses have been erected for a family alone or a few nurses or employees in addition. Such efforts should be encouraged until suitable accommodation be made for desirable persons who wish to remain in the service after marriage. This would mean the erection of modest houses of variable size, according to the needs of different families and the desirability of their living alone or in association with others, in apartments separate from each other or in the same building.

These houses or apartments should be rented on a cost basis.

The Board believes that such a general policy of more liberal wages, suitable regulation of hours of work, and provision for retention of worthy married officers and employees, would gradually build up a stable and efficient corps of workers, who would form a small community about the institution, have local interests and attachments, and exert a salutary influence through a healthy public sentiment in favor of good conduct and right living, which would eventually eliminate many discouraging features of the present situation.

METHODS OF SUPPORT

in public institutions are (1) private, when the whole expense is paid from private resources, (2) reimbursing, when a part of the expense is paid from private resources, and (3) public, when the State or a municipality pays the whole expense.

The expense of public support of the feeble-minded, sane epileptic and inebriate is borne either by the municipality in which they have a settlement, or by the State in the absence of a settlement.

SUPPORT OF THE INSANE.

The insane under commitment, so far as they are public charges, are supported by the State. During the last year 8,813, or 88.12 per cent. of those under public care, were State pa-

tients; 458, or 4.58 per cent., reimbursing patients; 730, or 7.3 per cent., private patients. In addition, there were 254 private patients in private institutions.

Of all the insane under public care and in private institutions, 9.59 per cent. were supported wholly from private resources; 4.47 per cent. partially supported from private resources, at an average rate of \$2.95 per week; and 85.94 per cent. wholly at public expense.

TABLE 8. — *Support Status of the Insane under Supervision.*

NUMBER OCT. 1, 1906.				AVERAGE NUMBER — OCT. 1, 1905, to SEPT. 30, 1906.									
	State.	Reim- bursing.	Private.	Total.	STATE.		REIMBURSING.			PRIVATE.			Total.
					Number.	Percentage.	Number.	Percentage.	Average Rate of Board.	Number.	Percentage.	Average Rate of Board.	
Public institutions, . . .	8,570	532	724	9,826	8,600	88.18	455	4.66	\$2.95	698	7.16	\$5.78	9,753
Family care, . . .	242	5	38	285	213	85.89	3	1.21	2.31	32	12.90	3.45	248
Total public, . . .	8,812	537	762	10,111	8,813	88.12	458	4.58	\$2.95	730	7.30	\$5.68	10,001
Private institutions, . . .	—	—	260	260	—	—	—	—	—	254	—	—	254
Total public and private, .	8,812	537	1,022	10,371	8,813	85.94	458	4.47	—	984	9.59	—	10,255
Percentages, . . .	84.97	5.18	9.85	—	85.94	—	4.47	—	—	9.59	—	—	—

FINANCES OF INSTITUTIONS

for the insane, feeble-minded, epileptic and inebriate, so far as they relate to the State, are presented in detail in tables I to X., inclusive, in the Appendix.

Their Total Valuation

of real and personal property Dec. 1, 1906, amounted to \$13,-270,048.08; real, \$11,050,417.64; personal, \$2,219,630.44; representing increases for the year of \$627,318.68 real, \$166,-137.47 personal.

The Gross State Debt

on their account Dec. 1, 1906, amounted to \$4,180,050, an increase of \$463,500 for the year; interest charges for the year, \$143,951.50, an increase of \$16,222.50.

The Total Expenditures

exclusive of interest and sinking fund charges on account of such persons and institutions from Oct. 1, 1905, to Nov. 30, 1906, amounted to \$3,574,188.73, namely: —

(1) Expenses of the State Board of Insanity and of work under its direct control,	\$43,099 61
(2) Expenditures increasing the value of institution plants,	715,955 00
(3) Depreciation charges,	269,970 80
(4) Maintenance,	2,545,163 32

The Total Receipts

for the same period amounted to \$519,507.61, making the net expenditure, \$3,054,681.12. The sources of such receipts are board of patients, sales of products of farm and other departments supported by expenditures from maintenance funds, so that they should be applied to reduce the cost of maintenance.

The Whole Weekly Per Capita Cost

to the State for the support of a patient in the different institutions for these classes for the same period was \$4.55; namely, interest (3.34 per cent.) on investment, \$0.64; depreciation, \$0.41; maintenance, \$3.50. The average weekly per capita

receipts amounted to \$0.78, making the net weekly per capita cost \$3.77.

The whole weekly per capita cost of an insane patient in hospitals and asylums was \$4.73; namely, interest on investment, \$0.70; depreciation, \$0.43; maintenance, \$3.60. The average weekly per capita receipts amounted to \$0.72, making the net weekly per capita cost, \$4.01.

These and other related facts are set forth for each institution in the following tables:—

TABLE 9. — *State Debt on Account of Institutions for the Insane, Feeble-minded, Epileptic and Inebriate.*

INSTITUTIONS.	LOANS.				INTEREST.		Loan Sinking Fund.
	Issued.	Due.	Amount Dec. 1, 1906.	Increase for the Year.	1906.	Increase for the Year.	
Insane hospitals:—							
Worcester,	1901-1906	1931-1936	\$118,000 00	\$15,000 00	\$4,130 00	\$525 00	Prison and hospital.
Taunton,	1901-1906	1931-1936	245,600 00	8,500 00	8,401 00	297 50	Prison and hospital.
Northampton,	1901-1904	1931-1934	159,000 00	—	5,195 00	—	Prison and hospital.
Danvers,	1901-1903	1931-1933	193,600 00	—	6,006 00	—	Prison and hospital.
Westborough,	1901-1906	1931-1936	315,900 00	15,000 00	10,793 50	525 00	Prison and hospital.
Totals, . . . . .	. . . . .	. . . . .	\$1,032,100 00	\$38,500 00	\$35,125 50	\$1,347 50	
Insane asylums:—							
Worcester,	1902-1906	1931-1935	\$370,500 00	\$93,000 00	\$12,967 50	\$3,255 00	Prison and hospital.
Medfield,	1894-1903	1915-1934	1,447,800 00	—	50,673 00	—	Medfield Asylum.
State Colony,	1902-1906	1931-1935	440,200 00	51,000 00	15,407 00	1,785 00	Prison and hospital.
Totals, . . . . .	. . . . .	. . . . .	\$2,258,500 00	\$144,000 00	\$79,047 50	\$5,040 00	
Hospitals and asylums, . . . . .	. . . . .	. . . . .	\$3,290,600 00	\$182,500 00	\$114,173 00	\$6,387 50	
Miscellaneous:—							
Hospital for Epileptics,	1895-1906	1923-1936	\$483,450 00	\$90,000 00	\$15,568 50	\$3,150 00	Prison and hospital.
Foxborough State Hospital,	1906	1925	100,000 00	100,000 00	3,500 00	3,500 00	Prison and hospital.
School for the Feeble-minded,	1902-1906	1931-1935	306,000 00	91,000 00	10,710 00	3,185 00	Prison and hospital.
Totals, . . . . .	. . . . .	. . . . .	\$889,450 00	\$281,000 00	\$29,778 50	\$9,835 00	
Aggregates, . . . . .	. . . . .	. . . . .	\$4,180,050 00	\$463,500 00	\$143,951 50	\$16,222 50	

TABLE 10. — *Receipts and Expenditures on Account of Institutions for the Insane, Feeble-minded, Epileptic and Inebriate, from Oct. 1, 1905, to Nov. 30, 1906.*

	EXPENDITURES.				Total Receipts.	Net Expenditures.
	Increasing Value of Plant.	Depreciation Charges.	Maintenance.	Total Expenditures.		
State Board of Insanity:—						
Office, travelling and contingent expenses and salaries,	—	—	—	\$31,826 89	\$10 00	\$31,816 89
Transportation and deportation of patients,	—	—	—	16,347 14	22 60	10,324 54
Printing annual report,	—	—	—	925 58	—	925 58
Totals,	—	—	—	\$43,099 61	\$32 60	\$43,067 01
Insane:—						
Insane hospitals:—						
Worcester,	\$20,162 58	\$37,810 56	\$288,876 84	\$346,849 98	\$89,754 27	\$257,095 71
Taunton,	66,378 46	15,405 98	243,136 48	325,520 92	43,388 67	282,132 25
Northampton,	5,191 45	26,001 43	169,237 58	200,430 46	56,139 21	144,291 25
Danvers,	27,077 94	43,390 71	299,813 60 1	370,282 25	68,618 87	301,663 38
Westborough,	34,478 63	17,568 29	221,084 56	273,131 48	71,473 13	201,658 35
Boston,	—	—	144,036 28 2	144,036 28	2,460 07	141,576 21
Totals,	\$153,889 06	\$140,176 97	\$1,366,185 34	\$1,660,251 37	\$331,894 22	\$1,328,357 15
Insane asylums:—						
Worcester,	\$114,857 12	\$31,750 91	\$165,755 81	\$312,363 84	\$6,780 84	\$305,583 00
Medfield,	84,450 98	33,202 02	324,656 53	442,309 53	15,731 23	426,578 30
State Colony,	84,023 45	6,718 08	63,182 97	153,924 50	1,398 62	152,525 88
Totals,	\$283,331 55	\$71,671 01	\$553,595 31	\$908,597 87	\$23,910 69	\$884,687 18
Hospitals and asylums,	\$437,220 61	\$211,847 98	\$1,919,780 65	\$2,568,849 24	\$355,804 91	\$2,213,044 33
Miscellaneous:—						
Insane Wards, State Hospital,	\$19,049 94	\$10,787 65	\$88,575 05	\$118,412 64	\$490 70	\$117,921 94
Asylum for Insane Criminals,	8,450 33	3,261 39	71,503 22	83,214 94	7,500 74	75,714 20

Hospital for Epileptics (insane), Foxborough State Hospital (insane),	41,048 37 28,071 93	6,833 39 1,804 42	67,277 93 23,005 07	115,153 69 52,941 42	7,203 47 803 89	107,956 22 52,137 53
Totals,	\$96,620 57	\$22,746 85	\$250,361 27	\$363,728 69	\$15,998 80	\$553,729 89
Total institutions for the insane,	\$533,841 18	\$234,594 83	\$2,170,141 92	\$2,938,577 93	\$371,803 71	\$2,566,774 22
Family care,	—	—	39,346 05	39,346 05	429 64	38,916 41
Total insane,	\$533,841 18	\$234,594 83	\$2,209,487 97	\$2,977,923 98	\$372,233 35	\$2,605,690 63
Feeble-minded:— School for the Feeble-minded, Reimbursements to small towns,	\$87,327 78	\$25,497 28	\$209,248 78 2,589 52	\$322,073 84 2,589 52	\$74,614 83	\$257,459 01 2,589 52
Total feeble-minded,	\$87,327 78	\$25,497 28	\$211,838 30	\$324,663 36	\$74,614 83	\$250,048 53
Epileptic:— Hospital for Epileptics (sane), Hospital Cottage for Children, Reimbursements to small towns,	\$41,048 36	\$6,309 66	\$62,121 60 6,547 97 1,124 52	\$109,479 62 6,547 97 1,124 52	\$43,594 52 62 14	\$65,885 10 6,485 83 1,124 52
Total epileptic,	\$41,048 36	\$6,309 66	\$69,794 09	\$117,152 11	\$43,656 66	\$73,495 45
Inebriate:— Foxborough State Hospital, Insane hospitals,	\$53,737 68	\$3,569 03	\$47,467 59 ³ 6,575 37	\$104,774 30 6,575 37	\$28,970 17 ⁴	\$75,804 13 6,575 37
Total inebriate,	\$53,737 68	\$3,569 03	\$54,042 96	\$111,349 67	\$28,970 17	\$82,379 50
Aggregates,	\$715,955 00	\$269,970 80	\$2,245,163 32	\$3,574,188 73	\$519,507 61	\$3,054,681 12

¹ Special expenditure for water \$23,111.16 included.² Board of State charges, at \$3.25 a week.³ Includes expenditures for industries.⁴ Includes all receipts from cities and towns and receipts from industries.

TABLE 11. — *Whole Weekly Per Capita Cost to the State of Support of a Patient in the Different Institutions for the Insane, Feeble-minded, Epileptic and Inebriate, from Oct. 1, 1905, to Nov. 30, 1906.*

INSTITUTIONS.	Average Num-ber of Patients 1906.	Valuation of Plant 1905.	Per Capita Valuation.	WEEKLY PER CAPITA COST.					Net Cost.
				Interest 3.34 Per Cent.	Depreci-ation Charges.	Main-tenance.	Gross Cost.	Receipts.	
Insane hospitals:—									
Worcester,	1,151	\$1,649,847 63	\$1,433 40	\$0 92	\$0 51	\$3 88	\$5 31	\$1 20	\$4 11
Taunton,	944	693,458 00	734 60	47	25	4 00	4 72	71	4 01
Northampton,	768	783,075 62	1,019 63	65	52	3 39	4 56	1 13	3 43
Danvers,	1,289	1,773,593 19	1,380 60	89	55	3 53 1	4 97	87	4 10
Westborough,	909	807,330 57	888 15	57	32	4 03	4 92	1 29	3 63
Totals and averages,	5,061	\$5,713,305 01	\$1,128 89	\$0 73	\$0 44	\$3 77	\$4 94	\$1 03	\$3 91
Insane asylums:—									
Worcester,	764	\$755,431 94	\$988 79	\$0 64	\$0 64	\$3 34	\$4 62	\$0 14	\$4 48
Medfield,	1,519	1,573,698 04	1,039 30	67	34	3 29	4 30	16	4 14
State Colony,	334	335,769 67	396 14	64	33	3 10	4 07	07	4 00
Totals and averages,	2,617	\$2,666,839 65	\$1,019 04	\$0 65	\$0 42	\$3 28	\$4 35	\$0 14	\$4 21
Hospitals and asylums,	7,678	\$8,380,144 66	\$1,091 45	\$0 70	\$0 43	\$3 60	\$4 73	\$0 72	\$4 01
Miscellaneous:—									
State Hospital (Insane Wards),	539	\$303,369 79	\$729 81	\$0 47	\$0 33	\$2 69	\$3 49	\$0 01	\$3 48
State Farm (Asylum Insane Criminals),	540	302,702 02	560 56	36	10	2 17	2 63	23	2 40
Hospital for Epileptics,	527	468,995 72	889 93	57	38	3 78	4 73	1 48	3 25
Foxborough State Hospital,	204	212,339 61	1,040 88	67	44	5 66	6 77	2 39	4 38
School for the Feeble-minded,	1,057	681,666 91	644 91	41	40	3 25	4 06	1 16	2 90
Totals and averages,	2,867	\$2,059,074 05	\$718 20	\$0 46	\$0 33	\$3 22	\$4 01	\$0 92	\$3 09
Aggregates,	10,545	\$10,439,218 71	\$989 97	\$0 64	\$0 41	\$3 50	\$4 55	\$0 78	\$3 77

¹ Special expenditures for water, \$23,111.16, not included.

Final conclusions should not be drawn from the preceding per capita, inasmuch as they pertain to a single year, and will greatly vary for such a period, *e.g.*: the average number of patients does not correspond to the normal capacity of the institution, but is determined for a particular year by the degree of crowding; therefore the per capita valuation and consequently the per capita interest charge will fluctuate with the movement of patient population. In like manner depreciation charges may be large one year and small another, owing to irregular practice in keeping up repairs, renewals, etc. Likewise, running expenses will be affected by difference of inventories at the beginning and end of the year, by market conditions, etc. Eventually, however, the average of per capita over a series of years will eliminate these transient and variable factors, and present fairly reliable data indicative of the amount of work done and the comparative economy and efficiency of doing the State's business at the different establishments.

The quality of their administration is commonly gauged by the annual rate of maintenance, a partial and sometimes misleading presentation of financial transactions, and easily modified by variable methods of computation and idiosyncrasies of management, *e.g.*: it may be based on total expenditures from maintenance funds, or deduction may be made of income from sales of products, or allowance for difference of inventories at the beginning and end of the year to show consumption cost; repairs may be practically eliminated by seeking special appropriations for this purpose. Durability of original construction and adaptation to its purpose have a weighty bearing on after-expense for repairs, renovation and administration.

The tendency to tear down good construction before it has had full wear, or to remodel for new uses with reduction of capacity for patients, will appear in large depreciation charges or relatively larger investment in the plant respectively. The correlation of all expenditures over long periods in comparative form, so as to register the record of each institution in these three main expense departments, will tend to establish standards of relation between them, and facilitate a comprehensive review of all financial operations, from which important conclusions may be drawn, *e.g.*: a relatively small initial investment, with

correspondingly low depreciation and maintenance charges, would represent (other conditions being equal) the highest degree of economy and efficiency of original construction, planning and general administration. On the other hand, an equally small initial investment, with disproportionately high depreciation charges, would suggest lack of durability or of adaptation of plans to requirements, necessitating subsequent outlay to correct mistakes. Furthermore, relatively high initial investment might be justified by proportionately low depreciation charges, resulting from the durability or wise planning of original buildings. These and other possible deductions from such comparative tabulations will contribute, it is believed, to the formation of a fuller and fairer estimate of the relative values of different methods of building and administration.

Expenditures from Maintenance Funds

inclusive of repairs and improvements are classified comparatively for each institution in tables V. and VII. to IX., in the Appendix.

The average weekly per capita expenditure for the insane in hospitals and asylums was \$3.93, compared with \$3.71 in 1905 and \$3.67, the average for the last five years, an increase of 22 and 26 cents respectively. The greater cost this year is about equally divided between service and other maintenance expenses.

The Weekly Per Capita Cost of Service

rose from \$1.337 in 1905 to \$1.448 in 1906, an increase of \$0.111, or 8.3 per cent.

One person was employed for every 4.83 patients, compared with 5.12 in 1905, a relative increase of 6 per cent. in the number of employees.

The average monthly wage was \$30.40, compared with \$29.63, an increase of 2.6 per cent.

The greater number of employees was necessitated by the eight-hour law, which was in operation about four months. It will be operative throughout the coming year, and will proportionately increase the pay roll. It affects only the service outside the wards.

The Weekly Per Capita Cost of Ward Service

was \$0.528, compared with \$0.514 in 1905, and \$0.495, the average for the last five years. The increase of this year over last year is \$0.014, or 2.7 per cent.

One nurse was employed for every 9.71 patients, compared with 9.86 in 1905, and 10.31, the average for the last five years.

The rate of wages increased for the year 1.4 per cent.; the relative number of nurses 1.48 per cent.

The average monthly wage, in addition to board, lodging and washing, was \$25.93 for men, \$19.51 for women, \$22.26 for both, compared with \$21.96 in 1905, and \$22.08, the average for the last five years.

The weekly per capita cost of other maintenance expenses was \$2.528, compared with \$2.416 in 1905, and \$2.411, the average for the last five years. The increase for the year was \$0.112, or 4.64 per cent.

The weekly per capita cost of food was \$0.97, compared with \$1.035 in 1905, and \$0.99, the average for the last five years. This year's cost was \$0.065 below last year, and \$0.02 below the five years' average. The decrease is probably due to the consumption of food supplies on hand at the beginning of the year which appeared in the previous year's food account, which, it is to be noted, was unusually large in comparison with the five years' average.

ESTIMATES FOR APPROPRIATIONS FOR THE ENSUING YEAR.

Estimates for appropriations for expenditures under the direct supervision of the State Board for the fiscal year beginning Dec. 1, 1906, are:—

Travelling, office and contingent expenses of the Board,	\$5,000
Printing and binding the annual report,	1,000
Salaries of officers and employees,	25,800
Transportation and medical examination of State paupers under the charge of the Board,	11,500
Support of insane paupers boarded out under the charge of the Board,	37,000
Board of insane persons in the Boston Insane Hospital,	104,000
Support of State paupers in the Hospital Cottages for Children,	6,000
Expenses in connection with the support of certain feeble-minded persons and children having settlement in certain small towns,	1,500

The increase in the estimate for appropriation for travelling, office and contingent expenses of the Board is necessary because of additional work, requiring greater outlay for office supplies and travelling expenses.

The increase in the estimate for appropriation for printing and binding the annual report is necessary because of additional matter to be printed.

The increase in the estimate for appropriation for salaries of officers and employees is necessary because of additional clerical work and the regular salary advances based on length of service.

The increase in the estimate for appropriation for transportation and medical examination of State paupers is required because last year's appropriation was deficient, and is based upon the actual increase of such expenses for last year. The expense of transportation varies greatly from year to year, depending upon the number of patients whose mental condition and claims for support allow deportation, and upon the location of the places where they belong.

The increase in the estimate for the appropriation for the support of insane paupers boarded out in families is required to support a greater number of patients in families who would otherwise remain inmates in institutions, the amount being proportionate to the increase of previous years.

The increase in the estimate for the appropriation for the board of insane persons in the Boston Insane Hospital is required for the support of a greater number of patients in this hospital who would otherwise be State charges in State institutions, the amount being based on the increase of the previous year.

The decrease in the estimate for the appropriation for the support of State paupers in the Hospital Cottages for Children is due to a reduction in the number of State charges in that institution.

The apparent increase in the estimate for the appropriation for expenditures in connection with the support of certain feeble-minded persons and children is the pro rata requirement for an extra month, last year's appropriation being for eleven months and this year's appropriation for twelve months.

Estimates of Maintenance Expenses for 1907.

Under the provisions of chapter 184 of the Acts of the Legislature of 1906, it becomes the duty of the Board to consider the estimates for maintenance expenses of the different State institutions under its supervision, and to express its opinion as to the necessity or expediency of granting appropriations according thereto. Exclusive of the Insane Wards of the State Hospital and the Asylum for Insane Criminals, a part of the State Farm, both minor departments of institutions mainly under the supervision of the State Board of Charity, there are eleven such institutions, which provided last year for an average of 9,490 patients. It is estimated that they will care for an average of 9,700 patients during the ensuing fiscal year. Their estimates for maintenance expenses for 1907 amount to \$2,061,200, compared with \$1,951,507.99 in 1906 (11 months plus $\frac{1}{11}$), being an increase of \$109,692.01.

There are three reasons for such increase: (1) care of 210 additional patients; (2) increase in the number of employees necessitated by the eight-hour law (chapter 517, Acts of 1906); (3) increase in the cost of supplies, mainly food and clothing.

The increase in salaries, wages and labor is \$70,430.12; in food supplies, \$29,781.87; in clothing, \$11,168.52. The estimates in other expense departments do not materially differ from the actual expenditures of the preceding year. Where a natural increase would be expected, the supplies on hand at the close of the year will make up the apparent deficiencies in estimates.

Receipts from individuals for the support of private patients, from reimbursements, sales, etc., standing to the credit of the different institutions on December 1, amounted to \$382,307.85, which, deducted from the total of estimates, leaves a balance of \$1,678,892.15 to be appropriated for maintenance expenses this year.

These estimates have been carefully reviewed by the State Board, and are approved according to the following general and individual statements:—

Comparative Estimates for Maintenance during Fiscal Year 1907.

	AVERAGE NUMBER OF PATIENTS.		ESTIMATES FOR EXPENSES OF FISCAL YEAR 1907.								
	1906 (11 Mos).	1907 (estimated).	Salaries, Wages and Labor.	Food.	Clothing.	Furnish- ings.	Heat, Light and Power.	Repairs and Im- provements.	Farm, Stable and Grounds.	Miscellane- ous.	Total.
Worcester Hospital,	1,138	1,075	\$96,800 00	\$70,000 00	\$11,500 00	\$7,800 00	\$20,000 00	\$11,000 00	\$16,500 00	\$16,400 00	\$250,000 00
Taunton Hospital,	952	875	78,200 00	50,000 00	6,000 00	7,000 00	20,000 00	12,500 00	15,000 00	14,700 00	203,400 00
Northampton Hospital,	768	725	59,000 00	41,000 00	5,800 00	4,200 00	12,000 00	8,350 00	13,650 00	11,000 00	155,000 00
Danvers Hospital,	1,278	1,200	103,500 00	57,000 00	11,500 00	12,500 00	20,000 00	20,000 00	23,000 00	22,500 00	270,000 00
Westborough Hospital,	913	875	83,600 00	48,000 00	6,500 00	8,000 00	14,000 00	11,500 00	13,200 00	19,000 00	203,800 00
Worcester Asylum,	787	950	70,000 00	46,000 00	11,000 00	7,000 00	17,000 00	9,000 00	8,000 00	12,000 00	180,000 00
Medfield Asylum,	1,568	1,425	108,000 00	67,200 00	18,000 00	7,000 00	19,000 00	17,600 00	19,000 00	20,000 00	276,400 00
State Colony,	352	500	32,500 00	17,500 00	5,500 00	3,500 00	9,500 00	5,000 00	7,000 00	4,500 00	85,000 00
Hospital for Epileptics,	528	600	52,000 00	31,400 00	3,700 00	4,700 00	14,000 00	7,400 00	3,300 00	11,500 00	134,000 00
Foxborough Hospital,	201	300	24,000 00	15,700 00	3,200 00	1,200 00	10,300 00	5,700 00	6,500 00	12,500 00 ¹	73,100 00 ¹
School for the Feeble-minded,	1,065	1,175	88,600 00	47,100 00	13,700 00	9,800 00	16,400 00	16,500 00	16,500 00	13,900 00 ²	224,500 00 ²
Total,	9,490	9,700	\$796,800 00	\$490,900 00	\$98,400 00	\$72,700 00	\$172,200 00	\$124,550 00	\$147,650 00	\$158,000 00	\$2,061,200 00
Expenses 1906, 11 mos. + $\frac{1}{11}$,	-	-	\$726,369 88	\$461,118 13	\$87,231 48	\$72,452 20	\$172,734 83	\$125,397 90	\$146,630 65	\$159,672 92	\$1,951,507 99
Increase 1907,	-	210	\$70,430 12	\$29,781 87	\$11,168 52	\$247 80	\$534 83 ³	\$847 90 ³	\$1,119 35	\$1,672 92 ³	\$106,692 01
Receipts in treasury De- cember 1,	-	-	-	-	-	-	-	-	-	-	\$389,307 85
Total to be appropriated in addition to receipts,	-	-	-	-	-	-	-	-	-	-	\$1,678,892 15

¹ Inclusive of industries.² Assessment, \$89.89, paid city of Waltham for sewage disposal, not included.

NOTE. — Expenditure at Danvers Hospital of \$23,111.16 for water in 1906 excluded.

³ Decrease.

Worcester Hospital.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 1,075.		Average Number of Patients, 1,138.	Average Number of Patients, 1,234.	Average Number of Patients, 1,231.	Average Number of Patients, 1,149.	Average Number of Patients, 1,100.
Salaries, wages and labor,	\$96,800 00	\$86,000 04	\$85,732 66	\$94,096 47	\$88,941 84	\$82,599 09	\$74,183 81
Food,	70,000 00	67,158 48	67,828 05	75,208 51	71,804 66	64,718 14	55,502 83
Clothing,	11,500 00	12,538 38	11,473 85	10,754 17	10,982 89	8,424 71	10,074 06
Furnishings,	7,800 00	6,906 57	8,544 46	7,292 20	10,323 58	8,980 08	9,245 38
Heat, light and power,	20,000 00	18,711 74	20,142 49	22,821 43	30,251 51	31,332 49	22,580 78
Repairs and improvements,	11,000 00	13,814 63	14,614 12	19,434 51	18,791 26	15,498 23	16,244 07
Farm, stable and grounds,	16,500 00	17,875 04	15,774 03	15,716 52	18,624 49	15,591 83	17,005 82
Miscellaneous,	16,400 00	15,781 17	14,567 36	15,669 30	17,474 78	16,001 70	16,103 52
Total,	\$250,000 00	\$238,786 05	\$238,677 02	\$260,993 11	\$267,195 01	\$243,145 77	\$220,339 27
Receipts in treasury December 1,	\$65,847 02	-	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$184,152 98	-	-	-	-	-	-

Taunton Hospital.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 875.		Average Number of Patients, 952.	Average Number of Patients, 925.	Average Number of Patients, 896.	Average Number of Patients, 957.	Average Number of Patients, 947.
Salaries, wages and labor,	\$78,200 00	\$72,000 00	\$69,487 58	\$80,212 50	\$75,809 95	\$70,256 67	\$64,867 18
Food,	50,000 00	51,500 00	48,583 54	57,492 04	53,593 97	50,517 86	48,599 51
Clothing,	6,000 00	5,000 00	4,193 04	6,633 30	5,984 23	4,386 73	4,808 01
Furnishings,	7,000 00	6 000 00	5,899 71	9,556 17	9,309 49	9,241 90	7,098 35
Heat, light and power,	20,000 00	22,000 00	22,612 99	24,641 80	19,544 44	15,833 51	14,351 72
Repairs and improvements,	12,500 00	13,500 00	9,582 73	6,815 03	9,516 72	7,438 11	3,342 01
Farm, stable and grounds,	15,000 00	15,500 00	13,599 33	21,611 73	24,085 23	19,025 17	17,549 77
Miscellaneous,	14,700 00	15,818 53	12,672 11	14,733 36	13,989 65	12,006 23	12,542 38
Total,	\$203,400 00	\$201,318 53	\$186,631 03	\$221,695 93	\$211,893 68	\$188,706 18	\$173,158 93
Receipts in treasury December 1,	\$33,163 26	-	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$170,236 74	-	-	-	-	-	-

Northampton Hospital.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 725.		Average Number of Patients, 768.	Average Number of Patients, 735.	Average Number of Patients, 749.	Average Number of Patients, 670.	Average Number of Patients, 641.
Salaries, wages and labor,	\$59,000 00	\$50,442 48	\$50,738 97	\$49,225 74	\$44,516 52	\$42,984 19
Food,	41,000 00	34,043 75	43,415 03	40,182 89	31,029 64	33,549 41
Clothing,	5,800 00	3,092 04	5,023 21	4,739 42	5,014 72	3,913 80
Furnishings,	4,200 00	3,453 20	4,857 91	6,291 94	6,458 44	5,084 84
Heat, light and power,	12,000 00	14,071 37	11,751 53	16,589 17	14,528 65	7,462 50
Repairs and improvements,	8,350 00	8,903 61	9,516 58	9,411 35	5,965 08	8,975 70
Farm, stable and grounds,	13,650 00	14,204 29	11,984 56	12,710 47	11,564 93	8,304 51
Miscellaneous,	11,000 00	10,211 44	11,205 91	10,479 48	9,495 96	9,373 89
Total,	\$155,000 00	\$138,422 18	\$148,543 70	\$149,630 46	\$128,513 94	\$119,348 84
Receipts in treasury December 1,	\$42,768 95	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$112,231 05	-	-	-	-	-

Danvers Hospital.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 1,200.		Average Number of Patients, 1,278.	Average Number of Patients, 1,345.	Average Number of Patients, 1,281.	Average Number of Patients, 1,127.	Average Number of Patients, 1,112.
Salaries, wages and labor,	\$103,500 00	\$86,500 00	\$89,088 98	\$89,632 99	\$84,554 37	\$78,274 52	\$73,688 59
Food,	57,000 00	51,000 00	47,688 78	61,195 45	53,017 42	53,442 95	54,961 70
Clothing,	11,500 00	10,500 00	9,327 72	10,639 50	9,080 15	6,446 37	7,348 35
Furnishings,	12,500 00	11,000 00	10,999 61	10,764 48	11,849 77	16,183 77	9,723 32
Heat, light and power,	20,000 00	20,000 00	19,460 73	18,221 03	15,695 00	31,439 80	12,919 36
Repairs and improvements,	20,000 00	20,000 00	20,807 32	21,573 89	23,301 09	15,012 60	7,656 90
Farm, stable and grounds,	23,000 00	22,000 00	21,325 02	25,545 68	20,652 68	21,352 79	17,663 90
Miscellaneous,	22,500 00	23,409 57	22,554 05	18,389 49	17,552 81	18,091 18	12,432 81
Total,	\$270,000 00	\$244,400 57	\$241,252 21	\$255,961 91	\$240,763 29	\$240,243 98	\$196,394 93
Receipts in treasury December 1,	\$53,671 74	-	-	-	-	-	-
Amount to be appropriated in addition to receipts, .	\$216,328 26	-	-	-	-	-	-

NOTE. — \$23,111.16 expenditure for water, excluded in appropriation and expenses of 1906.

Westborough Hospital.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 875.		Average Number of Patients, 913.	Average Number of Patients, 891.	Average Number of Patients, 839.	Average Number of Patients, 763.	Average Number of Patients, 706.
Salaries, wages and labor,	\$8,600 00	\$71,279 22	\$71,048 05	\$72,155 13	\$67,505 74	\$61,561 94	\$58,277 82
Food,	48,000 00	43,528 94	44,067 26	50,454 53	43,800 80	43,279 03	38,791 40
Clothing,	6,500 00	6,469 33	5,831 81	6,009 64	4,463 93	2,615 65	2,889 76
Furnishings,	8,000 00	9,726 90	9,421 14	8,936 25	6,279 75	5,573 57	5,835 96
Heat, light and power,	14,000 00	11,303 73	10,505 19	12,290 06	15,084 59	13,112 09	12,780 76
Repairs and improvements,	11,500 00	10,811 03	10,625 91	17,292 43	11,250 81	7,025 39	5,537 10
Farm, stable and grounds,	13,200 00	12,554 63	12,389 62	13,236 43	13,249 02	10,457 67	9,105 86
Miscellaneous,	13,000 00	19,777 00	21,476 66	19,683 67	16,049 70	11,719 99	10,343 52
Total,	\$203,800 00	\$185,450 98	\$185,365 64	\$200,058 14	\$177,684 34	\$155,345 33	\$143,612 18
Receipts in treasury December 1,	\$55,375 64	-	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$148,424 36	-	-	-	-	-	-

Worcester Asylum.

	ESTIMATE 1907.	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 350.	Appropriation 1906 (11 Months).	Average Number of Patients, 704.	Average Number of Patients, 629.	Average Number of Patients, 535.	Average Number of Patients, 547.
Salaries, wages and labor,	\$70,000 00	\$53,337 27	\$48,469 57	\$42,665 16	\$36,117 11	\$31,057 88
Food,	46,000 00	33,618 68	40,944 98	36,446 10	35,189 37	29,320 86
Clothing,	11,000 00	8,366 39	7,845 56	7,362 39	7,052 00	6,785 54
Furnishings,	7,000 00	5,383 06	6,418 01	6,649 42	4,474 57	4,975 03
Heat, light and power,	17,000 00	13,066 19	14,597 55	10,727 30	10,132 16	6,145 74
Repairs and improvements,	9,000 00	8,201 23	8,387 46	5,631 21	3,759 74	5,285 11
Farm, stable and grounds,	8,000 00	6,776 01	5,965 39	3,259 63	1,431 31	2,301 01
Miscellaneous,	12,000 00	10,899 73	7,998 72	6,590 24	6,739 70	5,735 92
Total,	\$180,000 00	\$139,648 56	\$140,627 24	\$119,331 45	\$104,805 96	\$91,597 09
Receipts in treasury December 1,	\$5,212 95	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$174,787 05	-	-	-	-	-

Medfield Asylum.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 1,425.		Average Number of Patients, 1,503.	Average Number of Patients, 1,580.	Average Number of Patients, 1,552.	Average Number of Patients, 1,426.	Average Number of Patients, 1,300.
Salaries, wages and labor,	\$108,600 00	\$33,600 00	\$33,673 95	\$37,419 83	\$86,213 45	\$73,426 04	\$71,704 44
Food,	67,200 00	61,600 00	62,339 61	74,157 56	69,314 86	62,981 78	56,492 14
Clothing,	18,000 00	18,300 00	17,212 93	19,092 97	16,513 55	12,845 68	9,008 89
Furnishings,	7,000 00	6,700 00	6,318 14	7,956 04	9,384 96	12,304 40	11,854 03
Heat, light and power,	19,000 00	23,200 00	24,545 84	20,326 52	14,057 96	20,954 52	11,619 77
Repairs and improvements,	17,600 00	12,900 00	13,611 78	12,557 38	10,051 87	10,225 15	8,998 88
Farm, stable and grounds,	19,000 00	17,900 00	19,153 81	19,108 03	14,035 47	15,243 21	13,653 95
Miscellaneous,	20,000 00	19,131 51	19,398 98	23,360 75	16,195 16	16,431 75	12,119 83
Total,	\$276,400 00	\$253,331 51	\$256,317 04	\$273,979 03	\$235,767 28	\$224,412 53	\$195,451 93
Receipts in treasury December 1,	\$11,596 68	-	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$264,803 32	-	-	-	-	-	-

State Colony.

	ESTIMATE 1907.		Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.		EXPENSES 1905.		EXPENSES 1904.	
	Average Number of Patients (estimated), 500.			Average Number of Patients, 352.		Average Number of Patients, 200.		Average Number of Patients, 55.	
Salaries, wages and labor,	.	.	\$17,500 00	\$20,619 25	\$17,550 40	\$9,887 05			
Food,	19,000 00	11,988 60	7,902 78	3,843 22			
Clothing,	4,000 00	3,318 05	2,502 93	1,502 24			
Furnishings,	1,800 00	2,063 86	3,362 12	1,043 19			
Heat, light and power,	6,500 00	6,150 20	7,119 06	3,650 05			
Repairs and improvements,	2,300 00	4,159 85	3,697 20	3,301 66			
Farm, stable and grounds,	4,500 00	4,563 50	4,192 45	2,567 30			
Miscellaneous,	3,600 00	3,303 92	2,992 72	2,057 75			
Total,	\$50,200 00	\$56,166 73	\$49,319 66	\$27,942 46			
Receipts in treasury December 1,	-	-	-	-			
Amount to be appropriated in addition to receipts,	-	-	-	-			

Hospital for Epileptics.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 600.		Average Number of Patients, 528.	Average Number of Patients, 506.	Average Number of Patients, 457.	Average Number of Patients, 420.	Average Number of Patients, 354.
Salaries, wages and labor,	\$52,000 00	\$49,000 00	\$42,406 01	\$46,301 79	\$41,135 14	\$37,776 15	\$31,942 76
Food,	31,400 00	28,200 00	21,217 37	27,306 88	19,908 05	19,150 71	16,411 49
Clothing,	3,700 00	3,100 00	2,690 60	2,353 46	3,774 44	2,578 68	2,021 36
Furnishings,	4,700 00	4,200 00	3,242 01	4,166 68	4,943 67	2,504 74	1,969 39
Heat, light and power,	14,000 00	11,300 00	8,050 60	16,572 18	18,869 65	19,454 07	8,473 99
Repairs and improvements,	7,400 00	7,800 00	6,511 02	7,816 05	8,438 97	8,771 34	4,344 42
Farm, stable and grounds,	9,300 00	9,900 00	7,678 13	6,873 44	6,507 69	5,346 04	4,159 55
Miscellaneous,	11,500 00	11,835 00	8,965 90	8,570 50	10,338 48	10,174 88	8,903 79
Total,	\$134,000 00	\$125,335 00	\$100,761 64	\$119,860 98	\$108,916 09	\$105,756 61	\$78,226 75
Receipts in treasury December 1,	\$45,357 56	-	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$88,642 44	-	-	-	-	-	-

Foxborough Hospital.

	ESTIMATE 1907.		Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.		EXPENSES 1905.		EXPENSES 1904.		EXPENSES 1903.		EXPENSES 1902.	
	Average Number of Patients (estimated), 300.			Average Number of Patients, 201.		Average Number of Patients, 166.		Average Number of Patients, 175.		Average Number of Patients, 139.		Average Number of Patients, 190.	
Salaries, wages and labor,	\$24,000 00		\$19,000 00	\$19,194 19		\$18,659 41		\$17,260 13		\$16,472 60		\$17,872 97	
Food,	15,700 00		12,300 00	11,871 26		10,738 56		8,708 02		7,028 20		9,375 53	
Clothing,	3,200 00		1,400 00	1,316 86		1,625 39		1,081 88		854 29		817 60	
Furnishings,	1,200 00		800 00	906 24		1,521 23		1,883 89		1,114 55		442 89	
Heat, light and power,	10,300 00		7,300 00	6,813 83		7,687 38		5,199 96		8,209 04		5,704 80	
Repairs and improvements,	5,700 00		3,500 00	4,058 23		4,562 35		4,011 36		3,700 47		2,873 22	
Farm, stable and grounds,	6,500 00		4,500 00	4,937 85		4,961 29		5,620 22		5,384 84		4,435 61	
Miscellaneous, ¹	12,500 00		14,127 33	11,048 29		12,670 53		12,839 70		8,610 58		14,366 77	
Total,	\$79,100 00		\$62,927 33	\$60,146 75		\$62,426 14		\$56,905 16		\$51,374 57		\$55,879 39	
Receipts in treasury December 1,	\$21,442 74		-	-		-		-		-		-	
Amount to be appropriated in addition to receipts,	\$57,657 26		-	-		-		-		-		-	

¹ Includes industries.

Massachusetts School for the Feeble-minded.

	ESTIMATE 1907.	Appropriation 1906 (11 Months).	EXPENSES 11 MONTHS, 1906.	EXPENSES 1905.	EXPENSES 1904.	EXPENSES 1903.	EXPENSES 1902.
	Average Number of Patients (estimated), 1,175.		Average Number of Patients, 1,065.	Average Number of Patients, 977.	Average Number of Patients, 827.	Average Number of Patients, 792.	Average Number of Patients, 753.
Salaries, wages and labor,	\$88,600 00	\$70,200 00	\$70,112 62	\$67,732 33	\$58,421 26	\$53,445 89	\$48,863 48
Food,	47,100 00	39,200 00	41,746 24	45,067 20	35,174 89	31,561 65	29,098 09
Clothing,	15,700 00	13,100 00	13,749 42	6,715 68	5,192 80	8,107 91	8,664 82
Furnishings,	9,800 00	8,900 00	9,112 22	7,246 23	5,600 31	6,746 78	5,266 10
Heat, light and power,	16,400 00	13,700 00	13,366 24	12,868 50	13,406 37	14,290 81	3,954 75
Repairs and improvements,	16,500 00	13,700 00	12,729 53	16,244 22	11,503 85	12,091 73	7,734 67
Farm, stable and grounds,	16,500 00	13,700 00	13,373 51	11,266 03	10,735 47	11,290 57	9,426 29
Miscellaneous,	13,900 00	12,261 39	11,596 13	12,546 99	10,714 33	10,087 01	8,435 53
Total,	\$224,500 00	\$184,761 39	\$185,785 91	\$179,747 18	\$150,749 28	\$147,622 35	\$121,443 73
Receipts in treasury December 1,	\$46,757 00	-	-	-	-	-	-
Amount to be appropriated in addition to receipts,	\$177,743 00	-	-	-	-	-	-

NOTE. — Assessment \$820.89 paid city of Waltham for sewage disposal not included.

ESTIMATES FOR SPECIAL APPROPRIATIONS

for the different institutions have been considered by the State Board in compliance with section 4, chapter 87, Revised Laws. They amount to \$393,800, compared with \$444,750 appropriated last year, and \$547,300.43, the average annual total of such appropriations since 1898.

The decrease in the amount needed this year is due to a reduction in the accumulation of the insane in institutions during the last two years, and the recent construction of new buildings which have relieved overcrowding. There is no present need of new buildings for the insane, except for improving the classification and facilities for the treatment of the acute and curable class. There is, however, urgent need of continuing the policy of gradual and progressive enlargement of accommodation for the feeble-minded and epileptic.

These estimates are classified as follows:—

Worcester Hospital.

Purchase of land,	\$18,000
Constructing and furnishing an addition of stone and brick for 80 disturbed patients,	50,000
Alterations in the old building over coal pocket for bath room and workshops, and the purchase and installation of bathing apparatus,	6,000
Construction of an iron staircase and elevator to fourth story of main building,	7,600
Total,	<hr/> \$81,600

These estimates are approved by the State Board.

Northampton Hospital.

Plumbing fixtures and material,	\$2,000
Electric lights on hospital grounds,	1,200
Purchase of cows,	2,000
Machinery for the bakery,	1,000
Additional sum for a hot house,	2,100
Lumber for an ice house,	700
Total,	<hr/> \$9,000

These estimates are approved by the State Board.

Danvers Hospital.

Construction of water tower and improvement of fire service,	\$15,000
Construction of two fire-proof sun rooms and fire-escapes as addition to ward buildings,	20,000
Purchase of land,	3,000
Total,	<hr/> \$38,000

These estimates are approved by the State Board.

Westborough Hospital.

Extension of the water system to connect with the town of Westborough water supply, and improvement of hospital fire service providing larger water mains,	\$5,400
Constructing and equipping new buildings for bakery, storage of supplies and refrigerating plant,	30,000
Construction of barn like the one recently burned,	13,000
Replacing stock lost by fire,	1,500
Total,	<hr/> \$49,900

These estimates are approved by the State Board.

Worcester Asylum.

Road-making outfit,	\$3,000
Sewage disposal, at the colony,	2,000
Water supply at the colony (exact amount not being determined because investigations are still in progress), about	5,500
Total,	<hr/> \$10,500

These estimates are approved by the State Board.

State Colony.

General water supply,	\$25,000
Construction of barn,	6,500
Constructing and furnishing superintendent's house,	10,000
Total,	<hr/> \$41,500

These estimates are approved by the State Board.

Asylum for Insane Criminals.

Completing and furnishing new industrial building,	\$5,000
Constructing an addition to nurses' home,	10,000
Total,	<hr/> \$15,000

These estimates are approved by the State Board.

Hospital for Epileptics.

Removing old buildings and laying new foundations for them, .	\$8,500
Constructing silos,	1,100
Alterations in old buildings, purchase and erection of feed water heater and bakery machinery and minor improvements, . .	3,400
Horse stable,	6,000
Total,	<hr/> \$19,000

These estimates are approved by the State Board.

Massachusetts School for the Feeble-minded.

Constructing and furnishing an addition to manual training building,	\$24,000
Constructing and furnishing a new hospital block for 20 patients, .	10,000
Constructing and equipping an addition to laundry,	4,000
Constructing iron stairways in boys' dormitory,	2,500
Extension of electric lighting to the farm group,	1,100
Constructing and furnishing two wooden houses for male employees, in addition to the \$5,000 appropriated for this purpose, .	3,000
Destruction of gypsy and brown-tail moths on Waltham property,	5,000
Total,	<hr/> \$49,600

These estimates are approved by the State Board.

New School for the Feeble-minded.

[Established under the provisions of chapter 508, Acts of 1906.]

Constructing and furnishing buildings for the care of 50 boys, .	\$18,500
Constructing and equipping an electric lighting, heating and power plant,	24,000
Constructing freight house,	6,000
Purchase of stock and farm equipment,	5,000
Alterations and repairs in old buildings, laundry machinery, machinery and tools for mechanical departments, preliminary water supply, and sewage disposal, engineering and other necessary work in developing the institution,	21,500
Total,	<hr/> \$75,000

These estimates are approved by the State Board.

Foxborough State Hospital.

Constructing coal trestle and repairs and enlargement of coal pocket,	\$4,700
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The trustees in their annual report request an appropriation of \$5,200 for the above purposes, but after reviewing the estimate the Board is of the opinion that the work can be done for a less sum, and recommends the appropriation of \$4,700.

SUMMARY OF RECOMMENDATIONS FOR SPECIAL APPROPRIATIONS.

Insane.

Constructing, furnishing and equipping buildings for patients and nurses,	\$60,000
Number of patients provided for,	80
Average per capita cost,	\$625 00
Number of nurses provided for,	18
Average per capita cost,	\$555 56
Patients and nurses provided for,	98
Average per capita cost,	\$612 24
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	198,133
Total,	\$258,133

Feeble-minded.

Constructing, furnishing and equipping buildings for patients and nurses,	\$28,500
Number of patients provided for,	70
Average per capita cost,	\$407 14
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	96,100
Total,	\$124,600

Epileptic.

Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	\$9,500
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Inebriate.

Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	\$1,567
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All Classes.

Constructing, furnishing and equipping buildings for patients and nurses,	\$88,500
Number of patients provided for,	150
Average per capita cost,	\$523 33
Number of nurses provided for,	18
Average per capita cost,	\$555 56
Patients and nurses provided for,	168
Average per capita cost,	\$526 79
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	305,300
Total,	<hr/> \$393,800

WORCESTER HOSPITAL.

Opened in January, 1833. Present capacity, 1,201.

Valuation of plant, per capita of capacity, \$1,431; real estate, \$1,243; personal, \$188.

Daily average number of patients, 1,158; decrease for the year, 85.

Number Oct. 1, 1906, 1,092; 9.08 per cent. below capacity.

All commitments, 439; decrease for the year, 76.

Commitments as insane, 433; decrease for the year, 77.

First cases of insanity, 348; 80.37 per cent.

Voluntary admissions, none.

Emergency commitments, 1.

Commitments as inebriate, 6 women.

First Cases of Insanity.

Native-born patients, 48.97 per cent.; mothers, 26.01 per cent.; fathers, 23.46 per cent.

Age sixty years or over, 17.1 per cent.

Resident in cities or large towns, 79.6 per cent.; country districts, 20.4 per cent.

Previous duration of insanity, under six months, 47.88 per cent.

Curable forms of insanity, 22.03 per cent.

Causes: congenital, 2.01 per cent.; hereditary, 21.26 per

cent.; alcoholic, 31.9 per cent.; senility, 12.35 per cent.; coarse brain lesions, 2.59 per cent.; syphilis, 6.32 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 76; 17.55 per cent. of commitments.

Recoveries of first cases of insanity, 60; 17.24 per cent. of first cases.

Recoveries in curable group A, 57; 75 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 136; 8.28 per cent. of whole number of persons treated.

Curable forms of mental disease present in 11.76 per cent.; tuberculosis in 12.5 per cent.; senile insanity in 28.67 per cent.; general paralysis in 25.74 per cent.; coarse brain lesions in 10.29 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$327,763; total receipts, \$89,754; being \$62,935 from private patients, \$14,512 from reimbursing patients, \$12,307 from other sources. (Compare with tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$4.23; the same less repairs and improvements, \$3.72; net cost to the State (expenditures less all receipts), \$3.18.

Weekly per capita cost of whole service, \$1.59; ward service, \$0.57.

One person employed for every 4.45 patients; 1 nurse for every 8.76 patients.

Average monthly wage for all persons employed, \$30.62; for nurses, \$21.60; men, \$25.54; women, \$18.73. (Compare with Table X. of the Appendix.)

In General.

The trustees note in their annual report that the hospital is now free from overcrowding of patients for the first time in many years. The effort to employ patients out of doors has been continued, with gratifying results in their improved health and conduct. The general health of patients has been better than usual.

The death rate was 8.28 per cent. of the whole number of patients treated, compared with 9.11 per cent. the previous year, although the percentage of deaths from senile insanity, general paralysis, coarse brain lesions and tuberculosis was 77.2, being 4 per cent. less.

The recovery rate, on commitments, fell from 22.94 last year to 17.55 this year, owing in part to the admission of fewer cases of delirium tremens, which have heretofore been received with considerable frequency, and make quick recoveries as a rule. Such patients are now very properly treated at the city hospital and escape the stigma of insanity. Another cause of the diminution arises from the extension of the trial visit from sixty days to six months, which had not gone into full operation at the end of last year, so that more recovered patients were absent on visit this year, whose recoveries will be reckoned in the percentages of next year. Thereafter this factor will be eliminated.

In his plea for better provision for excited and violent patients Dr. Quinby refers to the changes which have gradually taken place in the methods of treating this class, stating that "in the thirty years since the hospital was built there has been great progress in all that pertains to the treatment of the insane, and many of the provisions then considered adequate for their care are now set aside as antiquated or worse than antiquated. This is especially true in regard to the violent insane. At the time the hospital was built it was thought necessary to provide single rooms for all such patients, as a protection to themselves and others. Here, when they became disturbed, they could be isolated, or if they were violent and refused to remain in bed they could be restrained by mechanical means. If noisy or sleepless, the recognized treatment was to secure quiet through the use of drugs. Few, if any, would at that time have regarded

it as possible to treat such cases in a dormitory ward and in the same manner as a majority of the sick are cared for in a general hospital.

“Experience has proved, however, that the isolation of patients is almost always followed by untoward results, and leads to habits and practices not easily corrected, and that dormitory treatment for the majority of these cases is perfectly feasible. In place of drugs and mechanical restraint, we now resort to the hot pack and prolonged bath as a means of allaying excitement and sleeplessness, and instead of isolating such patients we have come to feel that unless they can be constantly under the care and observation of a sufficient corps of competent nurses the best that can be done for them has not been done. In an overcrowded ward, with no dormitory except an open corridor, and only a single bathtub, we have found it difficult in all cases to apply this method of treatment, due regard being paid (as was necessary) to economy of service. But now after several years’ trial, under these adverse conditions, I have no hesitancy in adding my testimony to the efficiency of this method, and in urging that the hospital be equipped with the means for more effectually and satisfactorily carrying it out.”

The training school for nurses has 46 young women in the junior class and 17 in the senior. Twenty-six nurses graduated last June, of whom one-half remain in the service of the hospital as supervisors and head nurses. Eight are taking post-graduate courses in nursing in general hospitals.

The electric lighting plant has been completed and in use during part of the year. The wiring throughout the buildings defaced many of the ceilings and walls, necessitating much replastering and painting, which has been finished in the women’s wards and is in progress on the men’s.

TAUNTON HOSPITAL.

Opened in April, 1854. Present capacity, 919.

Valuation of plant, per capita of capacity, \$849; real estate, \$685; personal, \$164.

Daily average number of patients, 945; increase for the year, 13.

Number Oct. 1, 1906, 943; 2.61 per cent. above capacity.

All commitments, 436; increase for the year, 13.

Commitments as insane, 429; increase for the year, 11.

First cases of insanity, 331; 77.15 per cent.

Voluntary admissions, none.

Emergency commitments, 1; decrease for the year, 3.

Commitments as inebriate, 7 women.

First Cases of Insanity.

Native-born patients, 43.12 per cent.; mothers, 25.16 per cent.; fathers, 25.08 per cent.

Age sixty years or over, 21.58 per cent.

Resident in cities or large towns, 71 per cent.; country districts, 29 per cent.

Previous duration of insanity, under six months, 43.01 per cent.

Curable forms of insanity, 14.2 per cent.

Causes: congenital, 5.44 per cent.; hereditary, 17.22 per cent.; alcoholic, 14.2 per cent.; senility, 12.99 per cent.; coarse brain lesions, 1.21 per cent.; syphilis, 5.13 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 30; 6.99 per cent. of commitments.

Recoveries of first cases of insanity, 18; 5.44 per cent. of first cases.

Recoveries in curable group A, 17; 36.96 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 106; 7.86 per cent. of whole number of persons treated.

Curable forms of mental disease present in 9.43 per cent.; tuberculosis in 12.26 per cent.; senile insanity in 25.47 per cent.; general paralysis in 28.3 per cent.; coarse brain lesions in 9.43 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$258,660; total receipts, \$43,389; being \$25,629 from private patients, \$12,336 from reimbursing patients, \$5,424 from other sources. (Compare with tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$4.15; the same less repairs and improvements, \$3.92; net cost to the State (expenditures less all receipts), \$3.51.

Weekly per capita cost of whole service, \$1.57; ward service, \$0.65.

One person employed for every 4.35 patients; 1 nurse for every 8.46 patients.

Average monthly wage for all persons employed, \$29.53; for nurses, \$23.66; men, \$26.75; women, \$21.06. (Compare with Table X. of the Appendix.)

In General.

Ill-health necessitated near the close of the year the retirement of Dr. Brown from the superintendency of the hospital, to the sincere regret of all who had been associated with him in direct or supervisory relation. He was endowed with qualities of mind and heart peculiarly fitting him for the duties of administering the affairs of a large hospital for the insane, and for more than a quarter of a century rendered to the Commonwealth and the patients in his care a service of singular devotion and efficiency. The hospital is the worthy product of his energy, breadth of view and progressive spirit.

The recovery rate falls much below the average, for special reasons common to all the hospitals this year. The chief one relates to the extension of the trial visit period from sixty days to six months, leaving a much greater number of patients absent at the end of the year but not yet discharged, so that the recoveries are not counted this year as they would have been on the old basis. The character of first admissions also was less favorable to recovery. Only 14.2 per cent. of the patients admitted belong to the curable group, compared with an average of 20.88 per cent. for all the hospitals.

The death rate was 78.6 per thousand of the whole number of patients treated, against 90.3 the previous year. Tuberculosis was present in 12.26 per cent. of those who died.

“The training school for nurses had a successful year. Eight nurses, 6 women and 2 men, were graduated and given diplomas in June. The school now has 28 members, — 24 women and 4 men. The good work of the school is shown in the improved character of the ward work and the more thorough and intelligent care given to patients. All the supervisors, both men and women, except the male night supervisor, and 9 of the 12 charge nurses on the women’s wards, are graduates of the training school. Graduates are also holding positions of responsibility in other departments of the institution; while the reports received from graduates who have left the hospital for work in other fields have been almost uniformly satisfactory. It is to be regretted that more men do not avail themselves of the advantages of the school, for the hospital needs well-trained men as well as women to properly care for the patients intrusted to its care. Strong efforts will be made to remedy this deficiency.”

The Raynham colony is developing satisfactorily. “The number of patients that have been cared for there during the past year has averaged about 65, more being cared for there during the summer than winter. All of these, with few exceptions, have done some useful work about the farm and buildings, with marked benefit to themselves. Twenty-five per cent. of this number when at the hospital proper belonged to that discouraging class of demented patients who have little energy or initiative, and are usually seen sitting listlessly or wandering aimlessly about the ward. Of this class, 60 per cent. have improved enough to do some work, while 40 per cent. have been much improved and are now useful helpers. During the year 3 were discharged to friends and one escaped, but was returned the next day.

“While the improvement in the condition of the patients is most gratifying, the steadily increasing improvement of the property is no less marked. In 1899, when the farm was first occupied, the principal output for the year was 40 tons of hay. This year the yield was 120 tons of hay from practically the same number of acres, together with 150 tons of silage and

other crops. Part of the corn, however, was grown on improved wild land and on the Leonard estate.

“The original purchase, the Briggs farm, consisted of 100 acres,—all grass land with the exception of a pine grove of about 6 acres. To this have been added from time to time 35 acres of wild land and the Leonard estate. Of the 35 acres of wild land, about 8 acres is swamp land, valuable only to grow wood; of the remaining 27 acres, about half has been subdued and is now under cultivation. Of the Leonard estate, about 14 acres is grass land; the remaining 24 acres is wood land, about 6 acres of which has been cleared during the past year. These 24 acres when cleared and properly drained will make as valuable grass land as any on the farm. The wood cutting, stump pulling, etc., will go on all winter, and afford useful and healthful occupation during the winter months.”

The many improvements and repairs which have been in progress very actively during several years have been completed, leaving the hospital in first-class structural condition.

The financial showing is gratifying, the per capita cost of maintenance being \$4.19, compared with \$4.66 the previous year, confirming our belief that the unusual cost of last year was exceptional, and due to causes not likely to persist.

NORTHAMPTON HOSPITAL.

Opened in August, 1858. Present capacity, 819.

Valuation of plant, per capita of capacity, \$1,029; real estate, \$884; personal, \$145.

Daily average number of patients, 767; decrease for the year, 27.

Number Oct. 1, 1906, 771; 5.86 per cent. below capacity.

All commitments, 256; decrease for the year, 47.

Commitments as insane, 254; decrease for the year, 46.

First cases of insanity, 198; 77.95 per cent.

Voluntary admissions, 4; increase for the year, 1.

Emergency commitments, 1; increase for the year, 1.

Commitments as inebriate, none.

First Cases of Insanity.

Native-born patients, 64.46 per cent.; mothers, 41.96 per cent.; fathers, 41.45 per cent.

Age sixty years or over, 22.22 per cent.

Resident in cities or large towns, 80.3 per cent.; country districts, 19.7 per cent.

Previous duration of insanity, under six months, 38.02 per cent.

Curable forms of insanity, 17.68 per cent.

Causes: congenital, 15.15 per cent.; hereditary, 29.8 per cent.; alcoholic, 25.25 per cent.; senility, 23.74 per cent.; coarse brain lesions, 4.04 per cent.; syphilis, .5 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 29; 11.42 per cent. of commitments.

Recoveries of first cases of insanity, 20; 10.1 per cent. of first cases.

Recoveries in curable group A, 20; 57.14 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 73; 7.1 per cent. of whole number of persons treated.

Curable forms of mental disease present in 10.96 per cent.; tuberculosis in 9.59 per cent.; senile insanity in 36.99 per cent.; general paralysis in 15.07 per cent.; coarse brain lesions in 9.59 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$191,239; total receipts, \$56,199; being \$38,252 from private patients, \$10,246 from reimbursing patients, \$7,701 from other sources. (Compare with Tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$3.68; the same less repairs and improvements, \$3.24; net cost to the State (expenditures less all receipts), \$2.71.

Weekly per capita cost of whole service, \$1.37; ward service, \$0.48.

One person employed for every 5.61 patients; 1 nurse for every 11.12 patients.

Average monthly wage for all persons employed, \$33.25; for nurses, \$22.97; men, \$26.49; women, \$19.92. (Compare with Table X. of the Appendix.)

In General.

The word "insane" has been stricken from the title of this hospital, by authorization of the last Legislature, at the request of the trustees. The name is now "Northampton State Hospital." This change has met with general approval, and is especially appreciated by the patients and their friends, who have written many commendatory letters to the superintendent.

For many years special prominence has been given to assemblies of patients for entertainment. They "have been varied in character, as shown by the following list. Usually music forms some part of each entertainment. October 4, Scotch songs, Gavin Spence; October 19, readings, Mrs. Moulton; October 21, training school graduating exercises; October 25, songs and recitations, Mr. Taggart; October 31, Hallowe'en party; November 8, pantomime, 'Editha's Burglar,' by patients and nurses; November 14, violin and song recital, Misses Jones, Steele and Schadee, and Mr. Steele; December 2, readings, Mr. Eccles; December 4, minstrels, Father Matthew's Total Abstinence Society; December 9, legerdemain, Mr. and Mrs. Martin; December 25, Christmas tree; January 6, concert, Bacon Banjo Club; February 19, card party; March 27, songs and readings, Mr. Reynolds; April 30, ventriloquism, Mr. Bryant; May 9, song recital, Misses Steele, Campbell, Belcher and Metcalf; May 12, song and dramatic recital, Mr. Brigham; May 14, 'Babes in Toyland,' Girls Friendly Society of Christ's Church, Springfield; May 26, drama, 'Just for Fun,' Guild of Unity Church, Amherst; May 30, base-ball game; July 4, band concert on lawn; September 8, concert by hospital orchestra; September 10, musicale, the Misses Woods; September 24, song and dramatic recital, Mr. Brigham; Octo-

ber 4, training school graduating exercises; October 9, songs and recitations, Mr. Taggart; October 12, concert, Mr. Bill and Mr. Bradley; October 17, songs and recitations, Mr. Reynolds; October 31, Hallowe'en party; November 6, readings, Mrs. Moulton; November 12, concert, Ariel Ladies' Quartette; November 22, legerdemain, Mr. Wilson. In addition to the above, there have been fifty-eight readings, seventeen dances, six stereopticon lectures and seven concerts."

Courses of gymnastics are being given both to nurses and patients, under the direction of a trained instructor. Two classes of patients and one of nurses take these exercises twice each week.

Fourteen patients have been placed in family care. "One of these was discharged as no longer requiring supervision, 2 were returned to the hospital because of illness and 2 because of attempts to leave their boarding places without permission. Nine patients remained in families at the end of the year. They have been visited regularly by some one of our staff. They were found to be comfortably situated, and seemed to be contented. There are others for whom we are now trying to find suitable boarding places."

DANVERS HOSPITAL.

Opened in May, 1878. Present capacity, 1,352; increase for the year, 38.

Valuation of plant, per capita of capacity, \$1,378; real estate, \$1,198; personal, \$180.

Daily average number of patients, 1,296; decrease for the year, 52.

Number Oct. 1, 1906, 1,227; 9.25 per cent. below capacity.

All commitments, 524; increase for the year, 7.

Commitments as insane, 520; increase for the year, 6.

First cases of insanity, 406; 78.08 per cent.

Voluntary admissions, 14; increase for the year, 10.

Emergency commitments, 1.

Commitments as inebriate, 1 man and 1 woman.

First Cases of Insanity.

Native-born patients, 53.82 per cent.; mothers, 34.08 per cent.; fathers, 32.66 per cent.

Age sixty years or over, 25.25 per cent.

Resident in cities or large towns, 83.25 per cent.; country districts, 16.75 per cent.

Previous duration of insanity, under six months, 37.47 per cent.

Curable forms of insanity, 26.26 per cent.

Causes: congenital, 2.46 per cent.; hereditary, 28.57 per cent.; alcoholic, 23.4 per cent.; senility, 14.28 per cent.; coarse brain lesions, 6.65 per cent.; syphilis, 5.66 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 46; 8.85 per cent. of commitments.

Recoveries of first cases of insanity, 36; 8.87 per cent. of first cases.

Recoveries in curable group A, 36; 36.37 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 174; 9.15 per cent. of whole number of persons treated.

Curable forms of mental disease present in 10.34 per cent.; tuberculosis in 13.22 per cent.; senile insanity in 27.59 per cent.; general paralysis in 22.93 per cent.; coarse brain lesions in 12.64 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$321,042; total receipts, \$68,619; being \$43,730 from private patients, \$20,287 from reimbursing patients, \$4,602 from other sources. (Compare with tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$4.03; the same less repairs and improvements, \$3.48; net cost to the State (expenditures less all receipts), \$3.21.

Weekly per capita cost of whole service, \$1.42; ward service, \$0.51.

One person employed for every 5.24 patients; 1 nurse for every 9.94 patients.

Average monthly wage for all persons employed, \$32.38; for nurses, \$22.24; men, \$25.91; women, \$19.08. (Compare with Table X. of the Appendix.)

In General.

The recovery rate is lower than usual, being 8.85 per cent. on commitments, against 17.7 per cent. last year. This is due largely to the extension of the period of trial visit from sixty days to six months, which for the first time became fully operative this year. As a result, many recovered patients are left out of the account this year, but will appear as recoveries next year. In addition, the first cases of insanity received were less favorable for recovery, the average duration of mental disease before admission being longer, the number of alcoholic cases less, and the proportion of senile patients greater.

The high character of medical and scientific work of this hospital continues.

"The laboratory physicians, as well as those engaged in clinical work, attend the daily staff clinic in psychiatry. Increasing interest and proficiency in professional lines of insane hospital work result from the harmonious relations of these departments.

"A new auto-clave, a modern electric high-speed centrifuge, a blowpipe and other pieces of apparatus have been added to the laboratory equipment.

"From Oct. 1, 1905, to Sept. 30, 1906, the statistical year, 91 autopsies were performed. In each autopsy, microscopic specimens are prepared from all the major organs of the body, in addition to specimens from typical areas on both sides of the cerebrum, from various parts of the cerebellum, and several levels of the spinal cord. In every case at least sixty specimens are sectioned, examined and described. About one case in three appears to deserve more extended study, and may require from two hundred to three hundred sections to complete a comprehensive record suitable for publication. In

each case cultures are made from the heart's blood, cerebrospinal fluid and the brain substance. Organisms found are studied thoroughly, so that each can be identified. Dr. Gay has systematized the autopsy and clinical bacteriology of the hospital, and is engaged in special studies in immunity, including work upon the sera of patients as well as experimental work on animals.

"The amount of clinical laboratory work is too considerable for enumeration.

"During the year fifteen papers for publication have been furnished from the laboratory, with the following titles, viz.: Cerebral arteriosclerosis; Acromegaly; Cholesterin stones in the brain; Pott's disease in the monkey; Aplasia of the cerebral hemispheres; Diffuse gliosis; Pneumococcus brain infection; Cerebral seizures, with sub-occipital pain; Glioma of the frontal lobe; Streptococcus meningitis; Basilar thrombosis; Granule layer of the cerebellum; Cell findings in soft brains; Late epilepsy; and Tuberculosis. The greater part of the above-named papers have been printed, and the remainder are in the hands of the printer."

In discussing the eight-hour law the superintendent writes in his report as follows:—

"The eight-hour law, as interpreted for us by the Attorney-General, does not apply to the ward workers, those hospital employees most entitled to consideration on the score of long days and exacting duties. This legal distinction seems invidious, and if the State can afford to pay the enhanced cost of management, it would seem to be a simple act of justice to place the ward nurses and attendants on an eight-hour basis. To maintain present standards of care for patients on the eight-hour basis would require about one-third more nurses and attendants. The cost for ward service the past year was \$34,509.93, one-third of which would be \$11,503.31, which sum would have to be added to the pay roll, and this does not include increased cost for board and accommodations."

The pavilions for tuberculous patients are finished, being sunny, cheerful and well suited to their purpose.

The new cottage at the Middleton colony is nearly completed. It has eleven bed rooms and a pleasant sitting room.

WESTBOROUGH HOSPITAL.

Opened in December, 1886. Present capacity, 919.

Valuation of plant, per capita of capacity, \$925; real estate, \$775; personal, \$150.

Daily average number of patients, 905; increase for the year, 27.

Number Oct. 1, 1906, 927; .87 per cent. above capacity.

All commitments, 436; decrease for the year, 27.

Commitments as insane, 395; decrease for the year, 35.

First cases of insanity, 307; 77.72 per cent.

Voluntary admissions, 40; increase for the year, 14.

Emergency commitments, 4; increase for the year, 3.

Commitments as inebriate, 18 women.

First Cases of Insanity.

Native-born patients, 62.42 per cent.; mothers, 42.21 per cent.; fathers, 43.34 per cent.

Age sixty years or over, 15.96 per cent.

Resident in cities or large towns, 66.45 per cent.; country districts, 33.55 per cent.

Previous duration of insanity, under six months, 55.73 per cent.

Curable forms of insanity, 17.61 per cent.

Causes: congenital, 1.95 per cent.; hereditary, 21.82 per cent.; alcoholic, 20.52 per cent.; senility, 10.1 per cent.; coarse brain lesions, 6.19 per cent.; syphilis, 3.91 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 55; 13.92 per cent. of commitments.

Recoveries of first cases of insanity, 45; 14.65 per cent. of first cases.

Recoveries in curable group A, 34; 64.15 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 92; 6.98 per cent. of whole number of persons treated.

Curable forms of mental disease present in 6.46 per cent.; tuberculosis in 13.04 per cent.; senile insanity in 25 per cent.; general paralysis in 26.09 per cent.; coarse brain lesions in 14.13 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$240,998; total receipts, \$71,473; being \$55,918 from private patients, \$12,248 from reimbursing patients, \$3,307 from other sources. (Compare with Tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$4.30; the same less repairs and improvements, \$3.98; net cost to the State (expenditures less all receipts), \$3.06.

Weekly per capita cost of whole service, \$1.62; ward service, \$0.59.

One person employed for every 3.97 patients; 1 nurse for every 7.79 patients.

Average monthly wage for all persons employed, \$28.04; for nurses, \$20.19; men, \$24.59; women, \$17.64. (Compare with Table X. of the Appendix.)

In General.

The recovery rate is lower than usual, for reasons common to all the hospitals, as previously explained. The lengthening of the trial visit to six months left many recovered patients out of this year's count who would have been included on the former basis.

Last fall "there was a marked increase of phthisical cases in the hospital, — 13 cases in the early stages having been received in two months. A temporary shack was erected near the Richmond cottages for convenience in care and supervision, and patients placed there a year ago. Several have had their lung affections cured, and, also improving mentally, have been sent

home to their friends. An appropriation of \$5,000 was given by the Legislature of 1906 for buildings to care for both men and women consumptives. A building for 20 tubercular women is being located at the south of Richmond colony, and, when completed, will permit the segregation of most of our consumptives from the other patients. A sanitarium for men will be started in the spring at the Warren farm colony."

Here, as elsewhere, "at certain times of the year great difficulty has been encountered in obtaining suitable male attendants, and this difficulty increases from year to year. The hours of service are long and the pay is comparatively small, having by no means kept pace with the general increase of wages. The requirements which make a good male attendant for the insane are much above the ability of the average day workman or serving man, and should receive adequate compensation, not only enough to enable him to eke out an existence, but sufficient to make him contented with his work, and encourage him to perfect himself and look to his position as a permanent employment, rather than, as is now too often the case, a make-shift until he can find something better to do.

"Isolated as the Westborough Hospital is, we believe it would be good policy for the Commonwealth to build upon the hospital domain inexpensive but comfortable houses for their married employees, which could be rented for a sum sufficient to cover the interest on the investment and the maintenance. Such an arrangement would tend to permanency of employment, and many a valuable servant to the hospital would be retained who now, under present conditions, is lost."

The superintendent briefly reviews the development of the hospital during the twenty years since its establishment:—

"The hospital was first planned for 405 patients; now we have accommodations for 950, under much more wholesome conditions. In these twenty years 7,247 cases have been received, and this year closes with a population of 944. Buildings to segregate and care for both the disturbed and quiet acute cases have been erected, the most important means for close observation, careful diagnosis and proper treatment. Two colonies, each for 100 patients, have been built, developing industry in those before idle, and at the same time giving much greater

freedom than in the large institution. Open-air treatment for the tubercular insane became imperative, and was started a year ago, and the results are already gratifying. The complete segregation of these classes will soon be accomplished. Out-of-door life for the acute insane and nervous was also begun last summer, and the results demand its continuance during colder weather."

The two junior assistant physicians now assist the pathologist in his laboratory work, thus enabling him to devote more time to histological study of post-mortem material and to clinical observation of patients upon the wards.

BOSTON INSANE HOSPITAL (MUNICIPAL).

Opened in December, 1839. Present capacity, 736; increase of 24.

Valuation of plant, per capita of capacity, \$1,415.

Daily average number of patients, 701; increase for the year, 47.

Number Oct. 1, 1906, 708; 3.8 per cent. below capacity.

All commitments, 298; decrease for the year, 105.

First cases of insanity, 250; 83.89 per cent.

Voluntary admissions, 3; decrease for the year, 1.

Emergency commitments, 36; decrease for the year, 30.

First Cases of Insanity.

Native-born patients, 50.8 per cent.; mothers, 23.48 per cent.; fathers, 23.58 per cent.

Age sixty years or over, 30 per cent.

Resident in cities or large towns, 98.8 per cent.; country districts, 1.2 per cent.

Previous duration of insanity, under six months, 42.72 per cent.

Curable forms of insanity, 17.55 per cent.

Causes: congenital, 2.8 per cent.; hereditary, 12 per cent.; alcoholic, 10 per cent.; senility, 22.4 per cent.; coarse brain lesions, 4 per cent.; syphilis, 1.2 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 30; 10.07 per cent. of commitments.

Recoveries of first cases of insanity, 25; 10 per cent. of first cases.

Recoveries in curable group A, 24; 55.81 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 126; 12.15 per cent. of whole number of persons treated.

Curable forms of mental disease present in 11.11 per cent.; tuberculosis in 8.73 per cent.; senile insanity in 42.06 per cent.; general paralysis in 24.6 per cent.; coarse brain lesions in 8.73 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$165,000; total receipts, \$141,217; being \$21,911 from private patients, \$119,049 from the State, \$257 from other sources.

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$4.50; the same less repairs and improvements, \$3.90.

In General.

This hospital is owned and managed by the city of Boston, but is under the general supervision of the State Board. The insane who have a Boston settlement are eligible for admission. Inasmuch as the city pays its proportionate part of the State tax for the support of all dependent insane under public care in the Commonwealth, it is reimbursed by the State at the rate of \$3.25 a week for each patient who is a public charge in the hospital. Its capacity of 726 is very inadequate to provide for the insane of Boston, of whom about two-thirds are sent to the State hospitals, oftentimes to the great inconvenience and expense of friends who desire to visit them.

A part of the third story of the Stedman building, which was formerly occupied by nurses, has been converted into a ward for 20 women patients.

The wards of the new buildings at the women's department are bright and cheerful. They are gradually being filled to the limit of their capacity by new commitments. At the men's department a new sun room is being constructed as an extension to the infirmary ward of the south wing. Its dimensions are 32 by 28 feet, with rounding front. It will add greatly to the comfort of the patients.

There has been great difficulty in securing and keeping a sufficient number of nurses, especially men. The training school continues to be helpful in improving the care of women patients. There were 11 graduates this year. Seventeen of a total of 38 graduates since the opening of the school have remained in the service of the hospital.

WORCESTER ASYLUM.

Opened in October, 1877. Present capacity, 827.

Valuation of plant, per capita of capacity, \$1,047; real estate, \$923; personal, \$124.

Daily average number of patients, 756; increase for the year, 68.

Number Oct. 1, 1906, 840; 1.57 per cent. above capacity.

Admitted by transfer, 200; increase for the year, 64.

Deaths of the Insane.

Whole number, 53; 5.86 per cent. of whole number of persons treated.

Tuberculosis was present in 16.93 per cent.; senile insanity in 5.66 per cent.; general paralysis in 1.87 per cent.; coarse brain lesions in 1.89 per cent. (Compare with Table 9.)

Finances.

Expenditures from maintenance funds, \$194,467; total receipts, \$6,781; being \$5,556 from reimbursing patients, \$1,225 from other sources. (Compare with Tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$3.89; the same less repairs and improvements, \$3.31; net cost to the State (expenditures less all receipts), \$3.78.

Weekly per capita cost of whole service, \$1.45; ward service, \$0.45.

One person employed for every 4.77 patients; 1 nurse for every 10.97 patients.

Average monthly wage for all persons employed, \$29.99; for nurses, \$21.16; men, \$25.42; women, \$17.20. (Compare with Table X. of the Appendix.)

In General.

The original asylum is located in the city of Worcester. It provides for 521 patients. On the completion of the congregate dining room for men the capacity will be increased about 20, when the present ward dining rooms are converted into dormitories. This may be expected to be near the limit of expansion in this location, on account of the small acreage of land and the liability of annoyance to citizens living in the vicinity who are disturbed by noise of patients.

Recognizing these limitations, the trustees have provided for future extension by the purchase of 750 acres of land in the town of Grafton, eight miles from the city, with good connection by steam and trolley lines. Here a mixed colony is rapidly developing. Substantial brick buildings have been constructed for two groups at considerable distance from each other, one for men and the other for women patients of the disturbed class who might be a source of complaint in the city. These groups already provide for 200 women and 150 men, and can be extended as need may arise. The greater freedom in outdoor life and exercise is found to be of great benefit to these troublesome patients, who will eventually become quiet and pass into the colony class.

At a distance and entirely distinct from these groups are three colony centres, separated about one-half mile from each other, and accommodating about 50 patients. The original farmhouses have been renovated and enlarged for domestic service and for employees, and small, one-story, wooden dormitories have been constructed for patients. Each colony has its own barn and farm equipment, and is administered as a separate unit.

The completion of the work now in progress will bring the capacity of the colony up to about 500, and that of the whole

institution to more than 1,000. New building operations will not be necessary in the near future, so that attention can be paid to internal development and better organization.

There is need of improving the water supply, sewage disposal and roadways, for which appropriations are asked this year.

The bridge across the Boston & Albany Railroad tracks abolishes a dangerous grade crossing.

The building for 100 disturbed women and a similar one for the same number of men have been completed and the former occupied. The dormitory for 50 men at Colony 3 is well advanced in construction.

MEDFIELD ASYLUM.

Opened in May, 1896. Present capacity, 1,506; increase for the year, 142.

Valuation of plant, per capita of capacity, \$1,122; real estate, \$965; personal, \$157.

Daily average number of patients, 1,523; decrease for the year, 60.

Number Oct. 1, 1906, 1,486; 1.33 per cent. below capacity.

Admitted by transfer, 12; decrease for the year, 109.

Deaths of the Insane.

Whole number, 73; 4.66 per cent. of whole number of persons treated.

Tuberculosis was present in 23.29 per cent.; general paralysis in 8.22 per cent.; coarse brain lesions in 2.74 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$357,020; total receipts, \$15,731; being \$10,169 from reimbursing patients, \$5,562 from other sources. (Compare with Tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$3.56; the same less repairs and improvements, \$3.23; net cost to the State (expenditures less all receipts), \$3.46.

Weekly per capita cost of whole service, \$1.28; ward service, \$0.50.

One person employed for every 5.33 patients; 1 nurse for every 10.86 patients.

Average monthly wage for all persons employed, \$29.45; for nurses, \$23.57; men, \$27.46; women, \$21.54. (Compare with Table X. of the Appendix.)

In General.

The trustees and superintendent comment on the increasing difficulty of obtaining suitable nurses and employees. "This asylum, in common with other institutions, has suffered for years (especially during the summer months) from the difficulty of obtaining capable attendants. During the last two years, when the prosperity of the country has made the demand for all kinds of help particularly active, this trouble has grown, till it has at times become a serious embarrassment to the management. Should the present conditions continue, this question will have to be met in the near future."

Ten nurses were graduated from the training school, 7 of whom will continue in the service of the asylum. The school has been of value in supplying head nurses, although the full demand has not been met. The superintendent desires some plan by which the pupil nurses may gain more experience in surgery and physical illness, both for their own improvement and as an inducement to entering the school. He thinks that a system of district nursing or exchange between his nurses and those of some general hospital would be useful both for the school and the asylum.

Three small cottages for employees and nurses have been completed. Each provides for a family and 6 other persons. It is hoped that this is only the beginning of adequate provision for married persons and their families, as a means of creating greater stability in the asylum service.

STATE COLONY.

Opened in October, 1902. Present capacity, 412; increase for the year, 109.

Valuation of plant, per capita of capacity, \$1,067; real estate, \$955; personal, \$112.

Daily average number of patients, 324; increase for the year, 158.

Number Oct. 1, 1906, 403; 2.18 per cent. below capacity.

Admitted by transfer, 184; increase for the year, 21.

Deaths of the Insane.

Whole number, 6; 1.36 per cent. of whole number of persons treated.

Tuberculosis was present in 50 per cent.; senile insanity in 16.67 per cent.; coarse brain lesions in 1.66 per cent. (Compare with Table 5.)

Finances.

Expenditures from maintenance funds, \$69,901; total receipts, \$1,399; being \$1,164 from reimbursing patients, \$235 from other sources. (Compare with Tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$3.42; the same less repairs and improvements, \$3.09; net cost to the State (expenditures less all receipts), \$3.36.

Weekly per capita cost of whole service, \$1.25; ward service, \$0.35.

One person employed for every 6.04 patients; 1 nurse for every 14.46 patients.

Average monthly wage for all persons employed, \$32.85; for nurses, \$22.23; men, \$23.20; women, \$20.32. (Compare with Table X. of the Appendix.)

In General.

The capacity for patients will be somewhat in excess of 500, on the completion of buildings now under construction. The demand for additional provision for the insane in the State will not necessitate any considerable new construction in the near future; hence, greater attention may now be paid to carrying out the primary purposes of the colony. Slow but steady progress in this direction is observed at each visit of inspection. It is anticipated that an early beginning may be made in the special training of demented patients with little or no initia-

tive, after the general methods applied in the development of the feeble-minded.

Much work has been done by the labor of patients. "During the past winter about 1,000 tons of stone were broken up for the stone crusher, of which some 800 tons were crushed in the spring. The winter occupations were clearing out brush in the woods, cutting trees for making electric and telephone poles, fence posts and cord wood. During the past summer much grading has been done; a mile of electric wire poles has been set up; sewer and water pipe trenches, amounting to about 4,000 feet, have been dug. Much stone has been removed from partially cleared land, and the regular farm work has been considerably increased. A number of acres of pasture, which had become grown over with bushes and trees, have been cleared, giving much additional grazing land."

The need of an adequate general water supply is urgent, inasmuch as more than half of the patients are housed in wooden buildings, and in case of fire the deficiency of water would be likely to result in great destruction of property, although there would be little if any danger to life in the one-story buildings, which have no window guards.

In planning this institution it was intended that the superintendent should have a separate house, in conformity to the general policy of the State in recent years. The administration building, in which he occupies a small suite of rooms, being unmarried, was constructed solely for the accommodation of other officers, and has no adequate provision for a superintendent and his family. It is earnestly recommended that an appropriation be granted for a superintendent's house at an early date.

INSANE WARDS, STATE HOSPITAL.

Opened in October, 1866. Present capacity, 563.

Valuation of plant, per capita of capacity, \$819; real estate, \$601; personal, \$218.

Daily average number of patients, 539; increase for the year, 14.

Number Oct. 1, 1906, 564; .18 per cent. above capacity.

Commitments as insane, 68; increase for the year, 2.

First cases of insanity, 62; 91.18 per cent.

Admitted by transfer, 141; increase for the year, 96.

First Cases of Insanity.

Native-born patients, 37.7 per cent.; mothers, 25.92 per cent.; fathers, 24.07 per cent.

Age sixty years or over, 30.64 per cent.

Resident in cities or large towns, 88.71 per cent.; country districts, 11.29 per cent.

Previous duration of insanity, under six months, 18.96 per cent.

Curable forms of insanity, 17.74 per cent.

Causes: congenital, 16.13 per cent.; hereditary, 17.74 per cent.; alcoholic, 24.19 per cent.; senility, 27.4 per cent.; syphilis, 6.43 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 7; 10.29 per cent. of commitments.

Recoveries of first cases of insanity, 5; 8.06 per cent. of first cases.

Recoveries in curable group A, 4; 36.37 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 65; 9.49 per cent. of the whole number of persons treated.

Curable forms of mental disease were present in 9.23 per cent.; tuberculosis in 32.31 per cent.; senile insanity in 23.08 per cent.; general paralysis in 7.69 per cent.; coarse brain lesions in 4.61 per cent. (Compare with Table 5.)

In General.

A new building for insane women has been completed, and adds greatly to the facilities for classification of patients in smaller groups than has been possible on the other wards. There will be no further need for the present of extending accommodation for the insane at this institution.

INSANE CRIMINALS.

The patients in institutions for the insane who are classed as criminals numbered at the end of the year 526 men, 42 women, 568 total; of whom 494 men were inmates of the Asylum for Insane Criminals, and 32 men, 42 women, 74 total, of other institutions.

ASYLUM FOR INSANE CRIMINALS.

Opened in September, 1886. Present capacity, 662; increase for the year, 203.

Valuation of plant, per capita of capacity, \$507; real estate, \$384; personal, \$123.

Daily average number of patients, 540; increase for the year, 27.

Number Oct. 1, 1906, 524; 20.85 per cent. below capacity.

Commitments as insane, 88; decrease for the year, 5.

First cases of insanity, 72; 81.81 per cent.

First Cases of Insanity.

Native-born patients, 42.25 per cent.; mothers, 17.91 per cent.; fathers, 17.39 per cent.

Age sixty years or over, 4.83 per cent.

Resident in cities or large towns, 75 per cent.; country districts, 25 per cent.

Previous duration of insanity, under six months, 54.1 per cent.

Curable forms of insanity, 15.49 per cent.

Causes: congenital, 8.33 per cent.; hereditary, 27.78 per cent.; alcoholic, 47.22 per cent.; senility, 4.17 per cent.; coarse brain lesions, 2.77 per cent.; syphilis, 4.17 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 21; 23.86 per cent. of commitments.

Recoveries of first cases of insanity, 15; 20.83 per cent. of first cases.

Recoveries in curable group A, 15. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 23; 3.77 per cent. of whole number of persons treated.

Tuberculosis was present in 52.17 per cent.; senile insanity in 13.04 per cent.; general paralysis in 4.35 per cent.; coarse brain lesions in 4.35 per cent. (Compare with Table 5.)

In General.

Satisfactory and encouraging results have followed the employment of a woman nurse to visit the sick men, prepare special diets, and teach the male attendants better methods of nursing.

A dispensary and laboratory have been provided at the asylum, contributing much to the convenience of doing medical work. An electro-therapeutic and X-ray outfit has been purchased. A large and well-arranged room has been equipped with hydro-therapeutic apparatus. A man trained as a masseur and hydropathist has been placed in charge. He will instruct both attendants and patients, so that they may assist him in treating a large number of patients.

EPILEPTICS.

There were under supervision Oct. 1, 1906, 1,086 epileptics, — 622 men, 464 women, being an increase of 20 for the year. They were located as follows: —

	NUMBER.			INCREASE FOR THE YEAR.		
	Males.	Fe-males.	Totals.	Males.	Fe-males.	Totals.
Hospital for Epileptics,	283	248	531	15	5*	10
Insane hospitals,	115	62	177	5	5*	-
Insane asylums,	114	90	204	2	21	23
School for the Feeble-minded,	43	22	65	3*	4*	7*
Hospital Cottages,	61	34	95	3*	2*	5*
Family care,	-	2	2	-	-	-
Private institutions,	6	6	12	3*	2	1*
Totals,	622	464	1,086	18	7	20

* Decrease.

In addition, the overseers of the poor report (March 31, 1906) 22 epileptics in city and town almshouses and 3 in families.

HOSPITAL FOR EPILEPTICS.

Opened in May, 1898. Present capacity, 591; increase for the year, 129.

Valuation of plant, per capita of capacity, \$1,044; real estate, \$781; personal, \$263.

Daily average number of patients, 526; increase for the year, 36.

Number Oct. 1, 1906, 531; 10.15 per cent. below capacity.

Insane commitments, 35; decrease for the year, 6.

Sane epileptics admitted, 111; increase for the year, 20.

First cases of epilepsy, 100, being 68.49 per cent. of all epileptics received.

The general statistics for the year are: —

	INSANE.		SANE.		TOTALS.	
	Males.	Females. ^a	Males.	Females.	Males.	Females.
Patients in hospital Oct. 1, 1905,						
Admitted within year,	141	140	127	113	268	253
Viz.: By commitment,	27	18	75	53	102	71
By transfer,	20	15	66	45	86	60
From escape,	1	1	2	—	3	1
From visit,	5	2	7	8	12	10
Whole number of cases within the year,	168	158	202	166	370	324
Discharged within the year,	21	38	66	38	87	76
Discharged,	5	4	29	17	34	21
As recovered,	—	—	—	—	—	—
As capable of self-support,	1	1	5	—	6	—
As improved,	4	3	16	12	20	15
As not improved,	—	1	8	5	13	6
Died,	10	7	12	6	22	13
Transferred,	2	26	—	—	2	26
Escaped,	—	—	2	—	2	—
On visit Oct. 1, 1906,	—	1	23	15	27	16
Patients remaining Sept. 30, 1906,	147	120	136	128	283	248
Viz.: State patients,	138	114	34	32	172	146
Town patients,	—	—	86	89	175	186
Private patients,	4	3	16	7	20	10
Reimbursing patients,	5	3	—	—	5	3
Number of different persons within the year,	164	154	194	159	358	371
Number of different persons admitted,	24	16	67	47	91	63
Number of different persons admitted by commitment,	20	15	66	45	86	59
Daily average number of patients,	147.36	126.17	132.04	119.74	280.00	245.91
Viz.: State patients,	140.35	119.38	27.99	23.66	168.34	143.04
Town patients,	—	—	86.87	89.94	86.87	89.94
Private patients,	3.74	3.67	17.18	6.14	20.92	9.81
Reimbursing patients,	3.87	3.12	—	—	3.87	3.12

¹ Includes 1 admitted nominally for discharge.² Includes 17 admitted nominally for discharge.

First Cases of Epilepsy.

Native-born patients, 78 per cent.; mothers, 43 per cent.; fathers, 40 per cent.

Mean age at onset of epilepsy, 16.81 years; when admitted, 22.74 years.

Resident in cities or large towns, 72 per cent.; country districts, 28 per cent.

Deaths of Epileptics.

Whole number, 35; 5.22 per cent. of whole number of persons treated.

Tuberculosis was present in 8.57 per cent.; epilepsy was the immediate cause of death in 65.71 per cent. Mean age at first attack of epilepsy, 24.78 years; at death, 38.43 years.

Finances.

Expenditures from maintenance funds, \$142,543; total receipts, \$50,798; being \$10,086 from private patients, \$1,284 from reimbursing patients, \$36,943 from cities and towns, \$2,485 from other sources. (Compare with Tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$4.09; the same less repairs and improvements, \$3.71; net cost to the public, \$3.76; net cost to the State (expenditures less all receipts), \$2.68.

Weekly per capita cost of whole service, \$1.68; ward service, \$0.63.

One person employed for every 4.05 patients; 1 nurse for every 8.55 patients.

Average monthly wage for all persons employed, \$29.55; for nurses, \$23.25; men, \$26.39; women, \$19.70. (Compare with Table X. of the Appendix.)

In General.

Sane epileptics are admitted to the hospital in increasing numbers. In order to make room for them it has been necessary the past year to transfer 25 insane women of the most intractable class to the Worcester Asylum. Further extension to provide for the insane should not be made for the present, at

least, inasmuch as there is greater need of additional provision for the sane and younger epileptics.

Epileptic children under the age of fourteen are cared for in the Hospital Cottages for Children, being excluded by law from the Massachusetts Hospital for Epileptics until they have passed that age. The accommodation in the Hospital Cottages is limited, and the mild character of the children prevents the admission of the more boisterous and intractable cases, who would have an unfavorable influence on the younger boys and girls.

It therefore happens with some frequency that the only alternative in caring for this class is their commitment to insane hospitals, where they may be obliged to remain for several years until they reach the age of admission to the Hospital for Epileptics. Furthermore, the period during which they should be receiving manual training is divided between the two institutions, so that adequate attention can be paid to it in neither. This is a serious omission in the development of the young epileptic in habits of industry and usefulness.

It is believed that all children under ten years of age would be suitable for the Hospital Cottages and could be accommodated there for the present, while the Hospital for Epileptics could properly receive the older and more intractable epileptics, and obviate the necessity of caring for them in the insane hospitals, where they cannot properly remain. After discussion of the matter with those interested, it has been agreed that the age limit of admission to the Hospital for Epileptics should be reduced from fourteen years to ten years, and the Board recommends such legislation.

The trustees urge the great importance of more adequate knowledge of pathological conditions in the epileptic.

“During the past fourteen months there have been 42 deaths among the patients and only 17 autopsies. It is extremely important that as large a number of autopsies as possible should be obtained in order to increase our knowledge of the exact conditions occurring in this affection and to enable us to act more efficiently for its relief and cure. Our knowledge cannot be adequately advanced unless we can have the opportunities for proper examination and investigation. These examinations

and investigations are not at all, as sometimes seems to be thought, for the benefit of the doctors or even for the institution. They are for the benefit of the public, of the citizens of the State as a whole, and more especially for those living under the affliction of this terrible disease."

The Board cordially approves of their efforts in this direction.

INEBRIATES.

There were under supervision Oct. 1, 1906, 136 inebriates, 109 men being inmates of the Foxborough State Hospital, 22 women of the State insane hospitals, and 5 men in private institutions.

FOXBOROUGH STATE HOSPITAL.

Opened in February, 1893. Present capacity, 182.

Valuation of plant, per capita of capacity, \$1,837; real, \$1,603; personal, \$234.

Finances.

* Expenditures from maintenance funds (including industries), \$75,906; total receipts, \$29,774; being \$1,953 from private patients, \$1 from reimbursing patients, \$23,526 from cities and towns, \$4,294, from other sources. (Compare with Tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$5.48; the same less repairs and improvements, \$5.04; net cost to the State (expenditures less all receipts), \$3.71.

Weekly per capita cost of whole service, \$1.95; ward service, \$0.55.

One person employed for every 4.44 patients; 1 nurse for every 12.42 patients.

Average monthly wage for all persons employed, \$37.71; for nurses, \$29.83. (Compare with Table X. of the Appendix.)

This institution continues to be a hospital for inebriates, as formerly, but, under the provisions of chapter 400 of the Acts of 1905, may receive such insane persons as the State Board of Insanity may transfer to it from other institutions.

At the close of the year there were 112 insane men of the

chronic class cared for in wards or buildings entirely distinct from the inebriates. Statistics regarding the insane will be found with those of other institutions for the insane in the Appendix.

The general statistics for the year relative to inebriates are as follows:—

Inebriates in hospital Oct. 1, 1905,	153
Admissions within the year,	304
By commitment,	272
By return from leave of absence of previous years,	20
By return from escape of previous years,	9
By return from visit of previous years,	3
Whole number of cases within the year,	457
Final discharges within the year,	92
By death while in the house,	7
By death while on leave of absence,	3
By death while on visit,	1
As insane,	5
By time limit while in the house,	22
By time limit while on leave of absence,	6
By time limit while on visit,	1
By time limit, escaped,	3
As not to be benefited by further treatment while in the house,	43
Deported,	1
Absent, not finally discharged,	256
Leave of absence,	211
Escape,	35
Visit,	10
Inebriates remaining in hospital Sept. 30, 1906,	109
Viz.: State patients,	59
Town patients,	45
Private patients,	5
Number of different persons within the year,	453
Number of different persons admitted,	303
Persons committed,	271
Daily average number of inebriates,	130.88
Viz.: State patients,	68.66
Town patients,	58.34
Private patients,	3.88

The daily average number of inebriates was 131, being 16 less than the previous year. There were 272 commitments, 40 less than the previous year. One hundred and eighty, or 66.18 per cent., were admitted for the first time to any institution for the treatment of inebriety. Two hundred and thirty-five, or 86.4 per cent., were admitted for the first time to this hospital, 29 for the second, 4 for the third, 2 for the fourth, 1 for the fifth, 1 for the sixth. Fifty-eight per cent. of those first committed to this hospital were natives of Massachusetts; 76 per cent. natives of the United States; 40 per cent. of the parents were native born.

The average age at which the habit began is 29 years; when admitted, 41 years. Forty-six, or 19.57 per cent., were over fifty years old when admitted. The average known duration of inebriety was 17.41 years. Two hundred and eight, or 88.51 per cent., came from cities and large towns; 27, or 11.49 per cent., from country districts.

Forty-three patients were discharged, as not to be benefited by further treatment.

There were 230 discharges between July 1, 1905, and July 1, 1906; of whom 93, or 40.44 per cent., were reported temperate, and 37, or 16.09 per cent., improved in drinking habits, after Oct. 1, 1906.

The new heating, electric lighting and power plant is now in use. The building is one story, constructed of brick, and provides for five boilers of 150 horse-power each, although only three have been installed to meet present requirements.

The new building for 100 men is nearly finished. It is constructed of brick, and has two stories with a basement used for dining room and sitting room. The day rooms are pleasant and cheerful.

THE FEEBLE-MINDED.

There were under supervision Oct. 1, 1906, 1,387 feeble-minded persons, — 819 male, 568 female, an increase of 56 for the year. They were located as follows: —

	NUMBER.			INCREASE FOR THE YEAR.		
	Males.	Fe- males.	Totals.	Males.	Fe- males.	Totals.
School for the Feeble-minded,	668	452	1,120	51	41	92
Hospital Cottages,	8	9	17	1	1	2
Dr. Brown's institution,	46	13	59	2*	1*	3*
Almshouses,	97	94	191	19*	16*	35*
Totals,	819	568	1,387	31	25	56

* Decrease.

In addition, the overseers of the poor report (March 31, 1906) 36 feeble-minded in families.

MASSACHUSETTS SCHOOL FOR THE FEEBLE-MINDED.

Opened in October, 1848. Present capacity, 1,262; at Waltham, 1,062; at Templeton, 200.

Valuation of plant, per capita of capacity, \$643; real estate, \$539; personal, \$104.

Daily average number of patients, 1,044; increase for the year, 110.

Number Oct. 1, 1906, 1,120; 11.25 per cent. below capacity.

The general statistics for the year are:—

	Males.	Females.	Totals.
Number Oct. 1, 1905,	617	411	1,028
Admitted within the year,	110	77	187
Viz.: School cases,	65	45	110
Custodial cases,	45	32	77
Whole number of cases within the year,	727	488	1,215
Discharged within the year,	47	22	69
Died within the year,	12	14	26
Number Sept. 30, 1906,	668	452	1,120
Viz.: State patients,	-	-	211
Town patients,	-	-	398
Private patients,	-	-	52
Massachusetts school beneficiaries,	-	-	405
New England beneficiaries,	-	-	41
Supported by invested funds,	-	-	13
Daily average number of patients,	625	419	1,044
Number Sept. 30, 1906, at the school,	-	-	961
Number Sept. 30, 1906, at Templeton colony,	-	-	159
Applications for admission during the year,	-	-	368

“Of the 222 admissions, 107 were young, teachable pupils; included in this number are pupils capable of very great improvement. It has been many years since we have received so large a proportion of improvable cases. Thirty-nine of the admissions were females over fourteen years of age, and 35 males

over fourteen years of age; 23 of these adults were of a very improvable type. Thirty-three of the admissions were of the class requiring much nursing and care, and not particularly susceptible to educational influences. . . .

“Of the 76 discharges, 47 were taken away by their parents for various reasons; 3 were kept at home to attend public school; 6 New England beneficiaries were withdrawn to make room for younger pupils; 12 went to work for wages; 5 ran away and were not returned; 3 were removed by overseers of the poor. Of those who were discharged to work for wages, 3 are working as farm hands; 3 are working in a factory; and 1 each is working in a machine-shop, paper-mill and foundry respectively; 1 each as bootblack, messenger boy and as steward on a steamboat.

“Of the total number of discharges, 28 are so improved as to be capable of practical self-support, if their work could be supervised and directed, either at home or under protected employment. Every one of these pupils showed decided mental and physical improvement; 36 other cases were returned to their friends in a decidedly improved condition; 12 of the cases discharged were not improved either physically or mentally. . . .

“There were 27 deaths during the year, — less than 3 per cent. of the average number present. Of these deaths, 8 resulted from pulmonary tuberculosis; 6 of these cases were suffering from tuberculosis when admitted. All were of feeble type, both mentally and physically; 2 were bedridden from the date of admission. Four deaths resulted from organic brain disease; 4 from acute lobar pneumonia; 2 from exhaustion of chronic idiocy; 2 from measles; and 1 each from cerebral hemorrhage, cerebral meningitis, acute enterocolitis, epilepsy, organic heart disease, scarlet fever and typhoid fever.”

Finances.

Expenditures from maintenance funds, \$234,746; total receipts, \$74,615; being \$26,793 from private sources, \$45,895 from cities and towns and \$1,927 from other sources. (Compare with tables IV. and V. of the Appendix.)

Weekly per capita cost of maintenance computed on expenditures less receipts except for board, \$3.61; the same less repairs

and improvements, \$3.22; net cost to the State (expenditures less all receipts), \$2.48.

Weekly per capita cost of whole service, \$1.37; ward service, \$0.73.

One person employed for every 4.85 patients; 1 nurse for every 7.16 patients.

Average monthly wage for all persons employed, \$28.87; for nurses, \$22.67; men, \$28; women, \$21.46. (Compare with Table X. of the Appendix.)

THE NEW SCHOOL FOR THE FEEBLE-MINDED.

The trustees of the New School for the Feeble-minded established under the provisions of chapter 508 of the Acts of the Legislature of 1906 were duly appointed and entered actively upon their duties. A suitable site for the institution has been selected in the town of Wrentham. Five hundred acres of land have been obtained by combining several adjoining farms, with good buildings upon them which can be renovated for the use of employees and temporarily for patients.

Alterations and repairs will be begun at once, in the hope that a few working patients may be received in the early spring to do necessary farm work during the summer. It is desired to immediately construct a group of one-story wooden buildings, similar to those at the Templeton Colony, for the care of 50 boys. They could be made ready for occupancy in the early fall, so that this help could be available in grading, road-building and other necessary work in the construction of the institution.

An immediate start should be made upon the central heating, power and electric lighting plant, laundry, domestic building, store house, farm equipment, water and sewerage systems, etc. A moderate appropriation for these and other purposes should be made this year, and is recommended.

According to the plan outlined, maintenance expenses will immediately begin, including the salary and expenses of the superintendent and other officers and employees having care of patients and carrying on the farm, the board of patients and employees, farm supplies, etc. It is estimated that an appropriation of \$10,000 will be needed for this purpose.

In the act establishing this school there is no mention of an official title, which was intentionally omitted, in order that it

might contain the name of the town in which it should be located. The Board recommends that the institution be called the Wrentham State School.

HOSPITAL COTTAGES FOR CHILDREN.

This is a private institution, for which the Governor appoints five trustees, in addition to those selected by the corporation. It is maintained from the income of private funds, donations and the board of patients. State and town charges are received for \$3.25 a week, although the weekly cost of support is considerably in excess of this amount. In consideration of this service, the State has from time to time appropriated money for buildings and structural improvements. It is subject to supervision by the State Board of Insanity, to which it makes a financial statement, and furnishes such other information as may be required.

Opened in June, 1882. Present capacity, 140. Daily average number, 138.

Valuation of plant, per capita of capacity, \$1,035. Permanent funds, \$99,141. Expenditures for maintenance, \$38,088. Receipts, \$41,315; support of State charges, \$9,425; from cities and towns, \$11,749; from individuals for support of patients, \$7,622; from sales, contributions and other sources, \$12,519. Weekly per capita cost of maintenance, \$4.27.

The general statistics for the year are:—

Patients in house Oct 1, 1905,	140
Admitted within the year,	53
Whole number of cases within the year,	193
Discharged within the year,	53
Viz.: As recovered,	7
As much improved,	13
As improved,	13
As not improved,	15
Died,	5
Patients remaining Sept. 30, 1906,	140
Viz.: State patients,	42
Town patients,	58
Private patients,	40
Daily average number of patients,	138
The largest number on any one day,	145
The smallest number on any one day,	130
Number of in-cases from opening of the hospital,	1,092

Thirty-six epileptics were admitted, being 67.92 per cent. of all admissions. Thirty-nine epileptics were discharged, of whom 5, or 12.82 per cent., had recovered.

It is noted with pleasure that the bed-ridden and feeble children have been removed from the upper to lower wards, where they can be more easily cared for in case of fire.

THE MCLEAN HOSPITAL

is a branch of the Massachusetts General Hospital. Four of its trustees are appointed by the Governor and 8 by the corporation.

Opened in October, 1818. Present capacity, 180.

Valuation of plant, per capita of capacity, \$9,712.

Average per capita cost of maintenance, \$25.99.

Daily average number of patients, 185.

Number Oct. 1, 1906, 184; 2.2 per cent. above capacity.

All commitments, 123; increase for the year, 8.

Commitments as insane, 120; increase for the year, 11.

First cases of insanity, 87; 72.5 per cent.

Voluntary admissions, 64; increase for the year, 17.

Emergency commitments, 4; decrease for the year, 5.

First Cases of Insanity.

Native-born patients, 83.72 per cent.; mothers, 67.53 per cent.; fathers, 64.1 per cent.

Age sixty years or over, 20.69 per cent.

Resident in cities or large towns, 73.56 per cent.; country districts, 26.44 per cent.

Previous duration of insanity, under six months, 49.43 per cent.

Curable forms of insanity, 61.04 per cent.

Causes: hereditary, 47.13 per cent.; alcoholic, 11.49 per cent.; senility, 3.45 per cent.; coarse brain lesions, 9.19 per cent.; syphilis, 3.45 per cent. (Compare with Table 3.)

Recoveries of the Insane.

Whole number, 38; 31.67 per cent. of commitments.

Recoveries of first cases of insanity, 22; 25.29 per cent. of first cases.

Recoveries in curable group A, 20; 42.55 per cent. of such curable cases. (Compare with Table 4.)

Deaths of the Insane.

Whole number, 17; 5.54 per cent. of whole number of persons treated.

Curable forms of mental disease present in 17.65 per cent.; senile insanity in 17.65 per cent.; general paralysis in 35.29 per cent.; coarse brain lesions in 17.65 per cent. (Compare with Table 5.)

In General.

"Of the 132 admissions, 56.8 per cent. were voluntary patients, an increase of 11 per cent. over such admissions for the preceding year. The percentage for the last three months of the year was 79.4. It is extremely probable that this increase is due to the change in the law regulating voluntary admissions to hospitals for the insane, so that any one now can be received upon his own request in writing whose mental condition is 'such as to render him competent to make such application.' Although so large a percentage were so received, no one of them was formally committed during the year, because of a request for discharge or for any other reason; and there remained in the hospital December 31, on the voluntary basis, 66 persons, — 35 men and 31 women."

This hospital is confronted with the same general problems in maintaining and elevating its medical and nursing service as are causing great perplexity in the State institutions, as shown in the following extract from the superintendent's report: —

"Hospital service should not necessarily be a bar to marriage, as is too often the case, although it may be doubted whether for a peaceful life any house is large enough for more than one family. At the present time three of the assistant physicians

are married and have homes outside the hospital. This is not convenient, nor does it tend to entirely satisfactory service. In order that they may be near their work and may be available at all times in emergencies, it is desirable that cottages be built on the hospital grounds for their accommodation, at a moderate rental, having telephone connection with the wards. They would then be as accessible as though they lived in the administration house. Such provision for its married medical officers would no doubt retain for the hospital the services of very desirable men, who, if not allowed to marry, would resign and engage in private practice. Two such cottages are needed at the present time. I recommend that they be built.

“It is also extremely desirable that good nurses be kept in the service after graduation from the training school, to take charge of the various wards, — men who would remain in the service long enough to command the respect and confidence of patients, their relatives and the assistant nurses; who would know their duty thoroughly, and would give valuable instruction by precept and example to the younger men; and who as loyal officers would make the work a calling or profession. Nothing could add more to the good reputation of the hospital.

“Aside from an adequate money compensation, it would avail much in some instances if the exceptionally good man could get married and have a small tenement on the grounds where he could have a home. This is no new idea. It has been the custom for many years in the English and Scottish hospitals to provide such accommodations for their married nurses and employees. In 1903 the Lanark County Asylum in Scotland had 35 such cottages, and it was claimed that for that hospital the problem of keeping good men in the service had been solved. I recommend the erection of two such tenements or cottages on the hospital grounds.”

THE SMALLER PRIVATE ESTABLISHMENTS

licensed by the Governor and Council to care for the insane now number 18. During the year a license was granted to Arthur H. Ring, M.D., of Arlington Heights.

Sane as well as insane patients are received.

The total number of inmates Oct. 1, 1906, was 172, — an increase of 18 for the year. There were 77 insane patients, being 45 per cent. of both classes. There were 60 insane admissions and 49 insane discharges during the year. These statistics are set forth in the following tabulations: —

“Bournewood.” — Henry R. Stedman, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1905,	1	1	6	7	15
Admitted during the year, . . .	-	1	3	4	8
Dismissed during the year, . . .	-	1	4	6	11
Number Sept. 30, 1906,	1	1	5	5	12

“The Highlands.” — Frederick W. Russell, M.D.

Number Oct. 1, 1905,	3	-	2	4	9
Admitted during the year, . . .	9	3	3	1	16
Dismissed during the year, . . .	9	3	3	3	18
Number Sept. 30, 1906,	3	-	2	2	7

“Channing Sanitarium.” — Walter Channing, M.D.

Number Oct. 1, 1905,	1	8	-	11	20
Admitted during the year, . . .	1	7	-	4	12
Dismissed during the year, . . .	1	3	-	3	7
Number Sept. 30, 1906,	1	12	-	12	25

Private Hospital. — Eben C. Norton, M.D.

Number Oct. 1, 1905,	2	1	-	2	5
Admitted during the year, . . .	-	5	-	-	5
Dismissed during the year, . . .	1	5	-	-	6
Number Sept. 30, 1906,	1	1	-	2	4

“Riverview.” — Walter F. Robie, M.D.

Number Oct. 1, 1905,	3	4	-	3	10
Admitted during the year, . . .	8	14	-	1	23
Dismissed during the year, . . .	9	14	-	-	23
Number Sept. 30, 1906,	2	4	-	4	10

“Herbert Hall.” — John Merrick Bemis, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1905,	-	-	1	7	8
Admitted during the year,	1	6	2	8	17
Dismissed during the year,	-	3	1	6	10
Number Sept. 30, 1906,	1	3	2	9	15

“Newton Nervine and Sanatorium.” — N. Emmons Paine, M.D.

Number Oct. 1, 1905,	6	6	-	2	14
Admitted during the year,	19	33	3	5	65
Dismissed during the year,	19	39	2	3	63
Number Sept. 30, 1906,	6	5	1	4	16

“Locust Grove Asylum.” — Miss Alice R. Cooke.

Number Oct. 1, 1905,	-	-	-	2	2
Admitted during the year,	-	-	-	1	1
Dismissed during the year,	-	-	-	-	-
Number Sept. 30, 1906,	-	-	-	3	3

“Cutter Retreat.” — William F. Heald, M.D.

Number Oct. 1, 1905,	4	2	1	1	8
Admitted during the year,	-	4	-	1	5
Dismissed during the year,	-	4	1	1	6
Number Sept. 30, 1906,	4	2	-	1	7

“Dr. Ring’s Sanatorium.” — Allan Mott Ring, M.D.

Number Oct. 1, 1905,	10	5	-	-	15
Admitted during the year,	31	43	-	-	74
Dismissed during the year,	34	41	-	-	75
Number Sept. 30, 1906,	7	7	-	-	14

“Framingham Nervine.” — Ellen L. Keith, M.D.

Number Oct. 1, 1905,	-	12	-	2	14
Admitted during the year,	-	29	-	1	30
Dismissed during the year,	-	31	-	-	31
Number Sept. 30, 1906,	-	10	-	3	13

“ Wellesley Nervine.” — Edward H. Wiswall, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1905,	3	3	-	5	11
Admitted during the year, . . .	9	17	-	11	37
Dismissed during the year, . . .	9	15	-	6	30
Number Sept. 30, 1906,	3	5	-	10	18

Private Hospital. — J. F. Edgerly, M.D.

Number Oct. 1, 1905,	-	-	-	-	-
Admitted during the year, . . .	1	3	-	1	5
Dismissed during the year, . . .	1	2	-	1	4
Number Sept. 30, 1906,	-	1	-	-	1

Private Hospital. — George B. Coon, M.D.

Number Oct. 1, 1905,	2	-	1	1	4
Admitted during the year, . . .	-	-	2	-	2
Dismissed during the year, . . .	-	-	2	-	2
Number Sept. 30, 1906,	2	-	1	1	4

“ Highland Hall.” — Samuel L. Eaton, M.D.

Number Oct. 1, 1905,	-	7	-	-	7
Admitted during the year, . . .	-	12	-	1	13
Dismissed during the year, . . .	-	14	-	1	15
Number Sept. 30, 1906,	-	5	-	-	5

“ Dr. Reeves’ Nervine.” — Harriet E. Reeves, M.D.

Number Oct. 1, 1905,	1	1	-	2	4
Admitted during the year, . . .	1	5	-	4	10
Dismissed during the year, . . .	2	6	-	2	10
Number Sept. 30, 1906,	-	-	-	4	4

“ Wheeler Sanitarium.” — Mrs. Maria H. Paul.

Number Oct. 1, 1905,	1	1	1	5	8
Admitted during the year, . . .	-	-	1	3	4
Dismissed during the year, . . .	1	1	1	3	6
Number Sept. 30, 1906,	-	-	1	5	6

“Arlington Health Resort.” — Arthur H. Ring, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1905,	-	-	-	-	-
Admitted during the year,	4	22	-	-	26
Dismissed during the year,	1	17	-	-	18
Number Sept. 30, 1906,	3	5	-	-	8

Total, Smaller Private Establishments.

Number Oct. 1, 1905,	37	51	12	54	154
Admitted during the year,	84	209	14	46	353
Dismissed during the year,	87	199	14	35	335
Number Sept. 30, 1906,	34	61	12	65	172

FAMILY CARE OF THE INSANE UNDER THE STATE BOARD.

First patient boarded in a family, Aug. 10, 1885. Since placed, 834 different patients.

Number in families Oct. 1, 1906, 285; 13 men, 272 women.

Placed during the year, 93 persons; a decrease of 11.

Daily average number for the year, 248; an increase of 32.

Passed out of public support:—

During the year, 25; an increase of 7, viz.: discharged self-supporting, 7; discharged to care of friends, 2; self-supporting on visit, 6; self-supporting in families, 7; boarding with friends without public expense, 1; became private patients, 2; reappeared under public support, none.

Since 1885, 166, viz.: discharged self-supporting, 70; discharged to care of friends, 31; self-supporting on visit, 6; self-supporting in families, 28; boarding with friends without public expense, 15; became private patients, 16; reappeared under public support, 39, 23 per cent.

Number of families having patients, 138; an increase of 12; 71 families having 1 patient; 22 families, 2; 12 families, 3; 31 families, 4; 2 families, 5.

Number of towns in which patients are boarded, 59; an increase of 1. Largest number of patients in any one town, 72; of families, 26.

The general statistics for the year are:—

	1906.			INCREASE FOR THE YEAR.		
	Men.	Women.	Totals.	Men.	Women.	Totals.
Remaining Sept. 30, 1905,	12	241	253	2*	42	40
Admitted within the year,	6	91	97	3	10*	7*
By transfer from institutions,	6	87	93	3	14*	11*
From escape,	-	1	1	-	-	-
Nominally at end of visit, for discharge,	-	2	2	-	2	2
Nominally from escape, for discharge,	-	1	1	-	1	1
Whole number of cases within the year,	18	332	350	1	31	32
Dismissed within the year,	5	60	65	-	-	-
Viz.: Discharged,	1	8	9	1	1*	-
Capable of self support,	-	7	7	-	1*	1*
Requiring further care,	1	1	2	1	-	1
Transferred to institutions,	-	41	41	4*	2*	6*
Unsuitable,	-	10	10	3*	9*	12*
Temporarily,	-	19	19	1*	11	10
Ill,	-	12	12	-	4*	4*
Died,	2	4	6	1	1	2
Escaped,	1	1	2	1	2*	1*
On visit Sept. 30, 1906,	-	6	7	1	4	5
Remaining Sept. 30, 1906,	13	272	285	1	31	32
Viz.: Supported by the State,	9	233	242	3	20	23
Reimbursing,	-	5	5	1*	4	3
Private,	1	16	17	1*	3	2
Self-supporting,	1	14	15	-	3	3
Living with friends without public aid,	2	4	6	-	1	1
Number of different persons within the year,	17	316	333	-	25	25
Number of different persons admitted,	5	87	92 ¹	2	10*	8*
Number of different persons dismissed,	5	58	63	-	-	-
Daily average number,	11.83	236.15	247.98	1.28	32.98	31.70
State,	6.68	205.96	212.64	.11	28.64	28.75
Reimbursing, . . . . .	.50	2.81	3.31	.20	.86	1.06
Private,	1.41	12.96	14.37	.46*	2.09	1.63
Self-supporting,	1.24	11.05	12.29	.73*	.79	.06
Living with friends without public aid,	2.00	3.37	5.37	.40*	.60	.20

* Decrease.

¹ Includes one woman returned from escape.

The total and weekly per capita expenditures of the State on account of patients in private families for the fourteen months ending Nov. 30, 1906, and since Oct. 1, 1889, are shown as follows: —

	Fiscal Year ending Nov. 30, 1906.	Since 1889.
Payments for board,	\$38,852 94	\$351,613 96
Average number of patients exclusive of private patients,	237.99	174.31
Weekly per capita cost of board,	\$2 68	\$2 29
Payments for extra clothing not included in board rate, . .	181 46	1,252 79
Payments for medical attendance, etc., not included in board rate.	311 65	2,926 43
Weekly per capita cost of such expenses outside of board rate.	03	03
Weekly per capita cost of support (being cost of board, clothing, medical attendance, etc.).	2 71	2 32
Payments for supervision (being transportation, salaries and expenses of visitors).	5,533 24	40,217 78
Average number of patients,	252.61	184.34
Weekly per capita cost of supervision,	\$0 36	\$0 25
Weekly per capita cost of support and supervision, . .	3 07	2 57

First Admissions.

Of the 72 such admissions, 10 had been in institutions continuously for less than a year; 12, one to two years; 8, two to three years; 5, three to four years; 6, four to five years; 5, five to six years; 3, six to seven years; 2, seven to eight years; 5, eight to nine years; 2, nine to ten years; 2, ten to fifteen years; 7, fifteen to twenty years; 4, twenty to twenty-five years; 1, thirty-four years. The average hospital residence was six years, seven months. Of the 21 persons so residing less than two years, 4 had been previously insane inmates of institutions.

Of the 72 persons first admitted, 4 were returned to institutions, 1 of whom was placed out again within the year; 1 left her caretaker; the remainder, 67, were successfully boarded, of whom 6 improved physically, 11 mentally, 9 mentally and physically (4 making very decided improvement) and 3 were discharged.

Readmissions.

Of the 21 such cases, 16 were readmitted for the first time, 4 for the third, 1 for the fourth. Sixteen had remained in institutions after return from boarding less than a year; 5, one to five years; the average duration being five months.

Three had been returned to institutions as unsuitable, after boarding an average of one month; 2 as ill, after boarding an average of eleven months; 15 temporarily, after boarding an average of fifteen months; 1 had been discharged self-supporting, after boarding one year, four months.

Discharges.

Nine cases were discharged; 1, after boarding four days; 1, one month; 2, three months; 1, four months; 1, nine months; 1, eleven months; 1, two years, six months; 1, three years.

One had been continuously an inmate of institutions prior to boarding out thirteen years, one month; 1, ten years, two months; 1, eight years, three months; 1, four years, eleven months; 1, four years, five months; 1, four years; 1, one year, ten months; 1, ten months; 1, one month; such average residence being five years, three months.

Seven were discharged self-supporting; 2 required further care.

In addition, 7 patients were on visit Oct. 1, 1906.

Transfers to Institutions.

Forty-one cases were transferred to institutions, 10 as unsuitable, 12 physically ill, 19 temporarily.

Of the 10 so transferred as unsuitable, 8 had boarded less than a year; 2, one to two years; the average duration being four and a half months. Nine had been tried in one family, 1 in two.

Of the 12 so transferred as ill, 6 had boarded less than a year; 1, one to two years; 2, two to three years; 1, three to four years; 1, fourteen to fifteen years; 1, seventeen to eighteen years; the average duration being three years, nine months.

Five remained in institutions; 5 died therein within six months; 2 were readmitted to family care within the year.

Of the 19 so transferred temporarily, 11 had boarded less than a year; 4, one to two years; 3, two to three years; 1, three years. Twelve were readmitted to family care within the year.

Transfers between Families.

There were 83 transfers between families, for the following reasons:—

Incompatibility,	8
Request of family,—patient troublesome,	20
Illness of care-taker,	14
Removal of care-taker,	4
Not useful to care-taker,	1
Care-taker unsuitable,	2
Occupying third-floor rooms,	2
For better accommodations,	1
From village to farm,—better suited to latter,	6
From farm to village,—better suited to latter,	2
To make room for another patient,	2
Made undesirable acquaintances,	1
To be nearer relatives,	1
To go to friends,	4
Arranged by friends,	1
Request of relatives,	2
To be nearer employment,	1
To become self-supporting,	6
For reduction of board,	5

Deaths.

Six patients died; 1 after boarding less than a year; 4, one to two years; 1, four to five years. In addition, 5 died in institutions within six months after returning. One took her own life by hanging. She was an invalid, but not despondent. She had boarded four and one-half years in four different families, and was not considered suicidal.

Escapes.

Three patients left their care-takers. One was assisted by friends, to whom she was later discharged. Of 2 no trace has been found, but both are capable of self-care.

Families.

The 285 patients remaining Sept. 30, 1906, were in 138 families, — a gain of 12. Seventy-one had 1 patient each; 22 families, 2; 12 families, 3; 31 families, 4; 2 families, 5. Twenty of these patients were with relatives, 2 with interested friends, 2 self-supporting in families of their own choosing, 1 in a family in each case.

Fifty-nine new families applied for patients, 10 being rejected. Forty new families were given boarders within the year. Three families became unsuitable, and patients were withdrawn. Three other families voluntarily relinquished their patients, 2 because of illness, 1 because of change of residence.

Towns.

The patients remaining Oct. 1, 1906, resided in 59 towns, — a gain of 1, as follows: —

Arlington, 1; Ashfield, 4; Ashland, 4; Beverly, 2; Billerica, 6; Boston, 5; Bridgewater, 1; Brookfield, 3; Chelsea, 1; Cummington, 2; Danvers, 1; Dennis, 1; Dover, 6; Dunstable, 3; Easthampton, 2; Easton, 8; Framingham, 1; Franklin, 1; Goshen, 2; Haverhill, 1; Hawley, 2; Holliston, 14; Hudson, 1; Laconia, N. H., 1; Leicester, 4; Lowell, 4; Malden, 2; Melrose, 4; Millis, 1; Needham, 4; New Bedford, 1; New Braintree, 1; Newton, 1; Northampton, 1; Northborough, 3; North Brookfield, 16; Norton, 7; Petersburg Junction, N. Y., 1; Petersham, 1; Prescott, 1; Reading, 5; Revere, 1; Royalston, 5; Salem, 1; Somerville, 3; Southborough, 5; Sterling, 1; Stoneham, 1; Taunton, 13; Tewksbury, 72; Tyngsborough, 1; Upton, 2; Walpole, 15; Westborough, 11; Whitman, 1; Williamsburg, 8; Wilmington, 9; Woburn, 4; Worcester, 2.

Chapter 458, Acts of 1905, authorized the trustees of institutions to place patients at board in families. Since the passage of the bill 15 patients have been so placed: 1 from Westborough Hospital, 14 from Northampton Hospital. Ten were so boarding on Sept. 30, 1906. The first patient was placed out June 13, 1905.

The statistics from that date to Sept. 30, 1906, are as follows: —

	Men.	Women.	Totals.
Admitted,	1	14	15
Dismissed,	1	4	5
Viz.: Discharged,	1	—	1
Capable of self-support,	—	—	—
Requiring further care,	1	—	1
Transferred to institutions,	—	4	4
Unsuitable,	—	2	2
Ill,	—	2	2
Remaining Sept. 30, 1906,	—	10	10
Viz.: Supported by the State,	—	6	6
Reimbursing,	—	1	1
Private,	—	2	2
Self-supporting,	—	1	1
Number of different persons within the year,	1	14	15
Number of different persons admitted,	1	14	15
Number of different persons dismissed,	1	4	5
Daily average number, . . . . .	.20	4.48	4.68
State,	—	2.16	2.16
Reimbursing,	—	.09	.09
Private, . . . . .	.20	1.91	2.11
Self-supporting,	—	.32	.32

SEMIANNUAL CONFERENCES

of the Board and the trustees of the different institutions were held on Nov. 21, 1905, and May 22, 1906. All the institutions, with one or two exceptions, were represented by trustees or superintendent, or both. An increasing interest in the discussions is noticeable. The various boards are coming to a better understanding of the work and purposes of each other, and, as a result, greater uniformity of action is apparent.

The subject under discussion in November was: Escape of patients from institutions: (1) What classes escape? (2) Percentage of dangerous patients that escape? (3) Number of parole patients? (4) Percentage of parole patients that escape? (5) Should parole be granted more or less freely? (6) Should "court cases" be granted parole? (7) What special precautions should be taken against escape? (8) What is your procedure of notification of a patient's escape? (9) What other

steps are taken to return an escaped patient? (10) Under what conditions do you discharge an escaped patient? (11) Have any patients been aided by employees to escape? (12) Should there be a penalty for so doing?

The views of the different speakers as expressed at this conference were as follows:—

Dr. H. M. Quinby, superintendent of Worcester Hospital:—

The number of escapes from the Worcester Hospital has been large during the past year, and much in excess of that of former years. I do not attribute this to any special lack of oversight on the part of my attendants, but rather to the fact that an unusually large number of patients have been employed outside of the wards, and many of them patients whose employment has hitherto been regarded as impracticable either on account of their demented condition, their turbulence, or this very propensity to run away. Three hundred out of a population of 500 men have been employed. In all, 49 patients have escaped. Thirty-eight were returned to the hospital after an absence of from a few hours to a few days, and 11 are still at large.

It is our custom when patients escape to at once inform the Worcester police, send out searching parties, telegraph the relatives or friends, and, in case the patient is likely to make trouble, inform the police of the place where he resides or to which he is likely to go. If not apprehended at once, we send one or more officers of the hospital to look him up. In court cases we inform the district attorney, and call in the aid of the State police in addition.

Were we to take their record at the time of commitment as a basis for determining the percentage of dangerous patients included in the number of escapes, we should have to say that 8 per cent. were of this class. It does not follow, however, that an insane person who may have been dangerous at the onset of his disease must necessarily continue to be dangerous. This manifestation of the disease is, as a rule, transitory and limited to the onset or to periods of excitement. The patients employed about our hospitals are not as a rule patients in the earlier stage of their disease. They have been under observation for a considerable time,—long enough, in fact, to enable us to form some definite opinion as to their condition as regards safety.

Seldom in my experience have any untoward results come from employing the insane, either through their escape or otherwise.

We have very few parole patients in the usual sense of the term, and my experience would lead me to restrict rather than extend the system, not for the reason that it gives more opportunity for escapes, but because it tends to idle habits. Believing as we do that some form of employment is best for every insane person who is physically fit, we insist when giving them liberties that they shall occupy their time in some definite work, rather than spend it at will idling about the grounds.

Theoretically I see no reason why "court cases" should be treated differently from other patients. They are sent to the hospital presumably to be cured. In the acute stage of their disease special precautions should be taken to insure their safety and to prevent their escape; but after convalescence has set in, to deny them privileges which for other patients are deemed essential to recovery would seem only to defeat the object for which they are entrusted to our care.

In all such cases it is within the province of the judge to decide as to the place of commitment. Where the criminal instinct is so prominent that the person's safe-keeping is the only or chief object to be considered, the patient should be sent to the hospital for the criminal insane rather than to one of the other hospitals. To require us to turn our hospitals into prisons in the interest of a few exceptional cases is an injustice to the larger majority of the insane who need no such restrictions.

While I would in no sense countenance any laxity in oversight, I am a thorough advocate of the open door, and of giving insane people all the liberty possible. My experience would lead me to increase rather than decrease the number of patients employed outside of the hospital and in the open air. Such employment is obviously so much for the advantage of the patient that we are justified, in my opinion, in running some risks. A certain number of patients will escape, no matter how painstaking those having them in charge may be; but the selection of patients given employment is so carefully made that the risk in this direction is slight. It is seldom, in fact, that any harm comes from escapes either to the patient or to the community.

We have had a few cases where patients have been assisted

to escape by employees, and, while this has not been a frequent occurrence, the cases so aided have generally been cases whose detention involved their own welfare if not the safety of the community, and whose escape gave us and their friends a great deal of anxiety and trouble. All that we can do in such a case is to discharge the person so offending. This seems to me a very inadequate penalty, and I feel that such an act should be regarded and treated as a criminal offence.

Dr. E. V. Scribner, superintendent of Worcester Asylum:—

Our patients are of a different class from those in the hospitals. During the twenty-eight years of the existence of the Worcester Asylum a little more than half of the patients who have escaped have been from the so-called closed ward class. The percentage of dangerous patients that escape is very small indeed. As to the percentage of parole patients, throughout the years about half who have escaped have been from this class. I believe that parole should be increased; that more liberty should be given our patients. In regard to court cases, I have had very little experience; I think that each should be treated on its merits. Our precautions are those which would naturally occur to any one. In case of escape, we notify the police of Worcester and send out scouts. In regard to discharging an escaped patient, we are guided by the condition of the patient. After two or three years, if we have no trace of him, he is discharged; or, if he goes to his friends and they wish to retain him, he is discharged. I think employees have assisted patients to escape in several instances. I think there should be a law in regard to this.

Col. Chas. R. Codman, member of the State Board of Insanity: Suppose a patient is known to be dangerous, or had been dangerous when he first came to the hospital, and even killed somebody, under any circumstances would you think it safe to give him an opportunity to escape?

Dr. Scribner: I should feel if a patient had committed murder that we should not allow him opportunity to escape.

Colonel Codman: Are patients who are suffering from dementia præcox likely to be dangerous sometimes?

Dr. Scribner: I think some could be very dangerous.

Mr. Nathaniel B. Borden, trustee of Taunton Hospital: —

The number of persons who escape from the Taunton Insane Hospital is very small. It therefore does not seem necessary to take any more precautions against such escapes than are already being taken.

Of the average of 931 patients last year, 228, or about 25 per cent., had their parole. The number of patients who have escaped during the year has been 13 (12 men and 1 woman), or about 1.4 per cent., and of this number 7 were paroled patients, so that only 3.11 per cent. of those who enjoyed their parole escaped.

At Taunton it is thought advisable to give as many patients as possible their parole, and it is very gratifying to know that so few abuse their privileges. Only 1 patient escaped who might be classed in the dangerous list, but he was not considered dangerous except that he might commit some petty offence.

It is not considered advisable to grant parole to court cases, but there is one simple old man, who would rather stay at the hospital than anywhere else, and he has been granted a parole.

Last May, when the escape of a girl brought so much notoriety to the Taunton Hospital, the trustees felt that it might be necessary to do something to prevent similar occurrences in the future. They investigated this matter very thoroughly, and considered many different methods. It was found that a key had been furnished this girl, and that preparations had been made for her escape, by one of the attendants on the ward, so that at an opportune time, probably when the day nurse went off and the night nurse came on, she unlocked the door between the ward and the stairway, and after going down stairs unlocked the outside door with the same key, and in that way escaped.

It was thought at that time that it might be necessary to have two keys instead of one, so that one key would unlock the inside doors and the other would be for the outside doors. Then, in case of an attempted escape, there might be some confusion in knowing which key to use, and the escape would be rendered more difficult, and perhaps frustrated. It was finally decided that, as the hospital was not, in any sense whatever, a prison, and as there were so few patients who did escape, or even tried

to escape, it was inadvisable to make any changes whatever. It is my opinion that the statutes should be so changed that any person aiding an inmate of any State institution to escape should be liable to punishment.

Dr. Henry R. Stedman, trustee of Taunton Hospital:—

I think that we do not sufficiently realize what an important duty it is to select patients for parole, — not only to see that no patient that is likely to be dangerous to himself or others or disturbing to the community be included, but also to make equally sure that every suitable patient in the hospital is accorded that liberty. Timid, chronic melancholiacs, for example, of the shrinking, self-depreciatory class, who may not dare to ask for parole, may be overlooked for want of careful inquiry. In all or most of our hospitals nowadays conferences of the medical staffs are held every few days to pass on the mental condition of individual patients, — a practice which is invaluable as a means for ascertaining the precise form or amount of insanity that is present, and the probable outcome of the disease. But why stop there? Why should not the treatment and kind of care for this or that particular patient, by all the methods, all the provisions that are available, be equally a subject of inquiry and effort? Why, for example, should not a ward of chronic patients, workers and non-workers alike, be regularly and systematically gone through, and selected ones brought before this examining body, so to speak, for the purpose of ascertaining which of them are by any possibility suitable for trial visits home, what cases are desirable for boarding out, who ought to be allowed parole, etc.? Are we not rather too much inclined to wait for such requests to be made to us by patients or their relatives before taking action?

Laboratory work and clinical observations of mental diseases and symptoms are, to be sure, of vital importance for a true knowledge of their nature, and the study of the pathology of insanity in our hospitals has happily taken on great impetus of late years; but they should not be allowed to overshadow, as I fear they sometimes do, the great function of the hospital, — the improvement of the condition of the patients of all classes, chronic as well as acute, and the utmost alleviation of their lot.

I do not make this comment without due consideration and knowledge of the exact situation. One fact alone shows that we are not alert enough in following up the needs and possibilities in the way of bettering the condition of the mild and chronic class, and that is, the frequency with which eloping parole patients are found on their arrival home to have become so well or so tractable that their relatives conclude to let them remain there. Does not this leave us somewhat open to the criticism that the ability of these patients to live at home should have been known to the hospital authorities long before, through investigation of their capabilities and perhaps trial visits, thereby hastening their freedom and saving expense to the State?

Dr. Chas. W. Page, superintendent of Danvers Hospital: —

We have found that most patients escape from the class which we employ about the buildings or on the grounds. In that class we have from 90 to 100 working on the farm and in the garden at all times, which means that there were considerably more than 100 individuals so employed during the year. Of this number, 15 escaped. Quite a number of these were cases recovering from alcoholic excesses, and consequently restless and troubled because not sooner discharged. These out-door workers are always under supervision, but frequently supervision is very lax, and they have innumerable opportunities to escape if anxious to do so.

One patient escaped four times during the year. He is a good, willing worker, and can be trusted to stay about the place for several months in succession, but occasionally takes his departure. He frequently returns voluntarily to the hospital, and when he does not, we know where to find him at his old home about ten miles distant. He is entirely harmless, and we allow him to resume his former occupation when he returns from one of his self-appointed trips. We have still a larger number engaged in the laundry, boiler house, stable and greenhouse, and a few thus employed escape. Then 7 escaped while out of doors for exercise. There must have been during the hospital year at least 700 individuals who enjoyed the out-door privileges, — walking and sitting upon the lawns. It would be extremely unwise to deprive 99 of such advantages in the way of health,

comfort and pleasure, because 1 in 100 succeeded in eluding the vigilance of the nurses. Four escaped from the wards of the hospital, — 2 by breaking windows at night, and the other 2 by some method not ascertained.

At Danvers we call those patients “escaped” who leave clandestinely and remain away one night or longer. In addition to the number thus classed, about 40 patients attempted to escape but were prevented by the vigilance of the nurses, or were overtaken and returned within a few hours. The larger number of these attempts were made by patients who were enjoying outdoor privileges as exercise or as recreation.

Four violated a parole privilege. I apply the term “parole” only to those patients who are at liberty to leave the ward at their own pleasure, and who can come and go without let or hindrance; for instance, at the colony, where there are no barred windows, no strong rooms, the ward doors are unlocked and patients come and go freely on the open veranda; there are 250 women there, but with few exceptions they are all under supervision of employees at all times, and consequently are not called parole patients. In the class of parole patients during the year there were at least 150 individuals, and the percentage of escapes is very small when the advantages conveyed by such privileges are considered. Then, there is really no way to prevent escapes from insane hospitals unless the modern methods of hospital management are very much modified for the worse in the prison direction. In former days, when patients were allowed very little liberty, when strait jackets were used freely, and the visiting of patients’ friends was almost prohibited, comparatively few escapes were recorded, but the comfort of the patients suffered in proportion to the degrees of restriction under which they were placed. The modern methods of non-restraint and liberal parole privileges result in great comfort to the patients, but add infinitely to the responsibility of the superintendent, who must be responsible not only for his own decisions and management, but is held by the public responsible for the mistakes, if any, of those under him, — quite a corps of officers, and at Danvers at least 150 employees.

Those who understand our institutions and the objects in view in liberalizing the treatment of the insane would be slow to re-

guard as evidence of mismanagement or carelessness an occasional escape. It is certainly the deliberate conviction of all who are closely associated with insane hospital management that the ends accomplished by modern methods justify the means employed, *i.e.*, conditions not sufficiently rigid to prevent escapes. It is seldom that any accidents follow from such escapes.

As a rule, court cases are closely watched and restricted as regards privileges. However, in several instances, where the patient has remained a long time under observation in the hospital, and has shown the characteristics which invite confidence, we have made an exception and given parole, and in one instance have boarded out a sentenced patient.

I would also further say that, to my mind, there would be little object in having a legal penalty attached to the misdemeanor of allowing patients to escape from the hospital. In my hospital experience I have known but few cases where I could be pretty certain that attendants were intentionally responsible for such escape, and in those cases proof was lacking; and for years I have not known an instance where we could have enforced a penalty if the laws of the State should attach one to such offences.

Colonel Codman: Suppose you had a patient who, previous to admission to an insane hospital, had killed somebody, would you give that patient parole or the opportunity to escape which so many patients have?

Dr. Page: I should not unless the patient had been under observation for a long time.

Colonel Codman: Would you feel justified in giving a patient suffering from dementia præcox opportunity to escape?

Dr. Page: I can imagine such a case.

Dr. George S. Adams, superintendent of Westborough Hospital:—

To speak intelligently upon the questions concerning the escape of patients from institutions, I made a table of all the escapes from the Westborough Hospital for five years ending Sept. 30, 1905. This table includes only those who were away more than one day. Those who escaped and were returned on the day of escape were not recorded in our discharge book, and I would have to search the histories of all the patients to deter-

mine how many there were. I believe, however, that a number equal to those recorded as escaped were returned on the same day.

The total number of escapes were 105; 17 were women and 88 were men. Of different persons there were 16 women and 75 men. Two patients each escaped three times and several others twice. All but 20 were returned to the hospital, and of those not returned we have received information about 10, and 5 of these had gone to other institutions. Two others were heard from in other States, and 3 were working in Massachusetts.

Replying to the questions, would say to the first that most of the patients who escaped had opportunity by reason of working outside of the wards or while they were out walking.

To the second question, will say that but 1 probably dangerous patient escaped, and that efforts were not relaxed until his return to the hospital. This is perhaps only our good fortune.

To the next two questions I would say that our number of parole patients has averaged 20 per cent. of the whole number in the past five years, and the number of paroled patients who escaped was 19, — 15 men and 4 women. Of the 15 men, 12 had an alcoholic history; and of the 4 women, 2 were committed as inebriates, showing the unreliability of alcoholics.

I would favor increasing parole privileges, rather than decreasing them. During the last hospital year there were over 300 different persons granted parole. In granting parole I consider first the mental and physical ability of the patient to care for himself. For this reason I grant parole privileges in warm weather which I take away in cold weather, as some might wander away and suffer from exposure. I consider, second, whether he is safe, — that is, neither suicidal nor homicidal. I would not deprive a patient of parole privilege, even if I thought he might run away, if I believed he was otherwise suitable. I have never given any court case a parole, not feeling it wise to accept their word; but I can believe, however, that conditions might arise where a court case could safely be granted this privilege.

The precautions to prevent escape depend upon carrying out the general instructions to employees and vigilance on their part, especially when patients are out of the ward. When a patient

has escaped, we notify the relatives and telephone to the adjoining towns, Westborough and Northborough, and also to the cities of Worcester and Marlborough, and follow up immediately any information as to the whereabouts of the patient. Should I believe the patient to be dangerous, I would continue efforts to secure his return. I never discharge an escaped patient. I report them to the State Board of Insanity as escaped, and where the relatives and friends, as sometimes happen, wish them to remain at home, I insist that they return and go out on a visit; and when they know that I have the right to send for them at any time, even after many months, they generally return and are discharged on the expiration of the sixty days' visit.

On two occasions I believe patients have been assisted to escape by employees. In both cases they accepted bribes from friends, and furnished keys. One of these assisted cases went out of the State and has not returned, and the other went into the adjoining State of Connecticut, and, after causing some notoriety through the daily press, was returned. Both the employees were discharged for the offence.

Dr. John A. Houston, superintendent of Northampton Hospital: —

I should say that we have about the same number of escapes relatively as the other hospitals. Comparatively few of our patients escape, and I think it is due largely to the increased amount of liberty which they have. Very few dangerous patients escape, because we take special steps to watch them. We have one at liberty now who has escaped three times. At present he is at his own home, and the town authorities are willing to have him remain. He was not dangerous to others unless they attempted to arrest him. He belonged to the possibly dangerous class.

The percentage of parole patients who escape is very small. I presume we have 200 patients who have as much liberty practically as those who are on parole; they are out at work, — on the farm, in the kitchen, in the laundry or out for walks. There are no patients who do not have out-door liberty. The walks are about one and a half miles in extent. I trust chiefly to the fact that the patients have so much liberty. If they want to run away, they will do so. A good many come back. I simply keep

a patient closely watched after his return, and usually give him about the same liberty he had before.

In case of escape, we telephone the police of neighboring cities, and next day notify the friends. It depends chiefly on the character of the patient. We usually know where he is likely to go. I would not give a dangerous patient opportunity to escape. We had only 2 patients escape from the wards last year, and they escaped by means of the same key.

We have had only one case to my certain knowledge within the last four or five years where a patient has been assisted to escape. Our engineer aided a patient to escape, and the penalty was severe enough in his case. I think it might be wise to have a statute that could be used. I would suggest that it might be well to make it obligatory upon the selectmen or overseers of the poor to return a patient who has gone to his place of residence. Every patient who has escaped and is returned is an object lesson to the other patients.

Mr. Wm. W. Swan, trustee of the Massachusetts School for the Feeble-minded: —

The patients in the School for the Feeble-minded are so different from the patients in the other institutions that the conditions there regarding escapes and attempts at escape and the means taken to prevent escapes can hardly be of use to the other institutions; but I am happy at having the opportunity of stating to the other boards of trustees just what sort of people the school has in charge, and the simple measures that are taken to prevent escapes. But more especially I would ask co-operation, or at least sympathy and good-will, in the efforts that our board of trustees are about to make to found a new school for the feeble-minded on the lines of the present school, and in their efforts to be relieved of the care of moral imbeciles.

There are now in the school 1,050 patients, and 200 persons under pay. Before the close of the coming year these numbers will have grown to 1,300 and 250, respectively, — large enough numbers, the trustees feel, to be under the supervision of a single superintendent. Of the 1,050 patients now in the school, 200 are at Templeton, most of them men grown and doing a man's work on the farms every day. There are a few cripples at the Tem-

pleton Colony who are cared for by their strong associates, and who keep alive in the latter instincts of humanity as nothing else would. Throughout the institution the old and the strong inmates have largely the care of the young and weak. Some of the large girls do an attendant's work. An English board of visitors, sent to the country early the current month to study and report on the institutions for the feeble-minded in America, were greatly interested at seeing at Waverley 50 of our big girls serving supper to the little children. But what struck these Englishmen as the most extraordinary feature of the institution was the absence of prison walls and prison methods both at Waverley and at Templeton. The boys at Templeton have a feeling of ownership in the vast estate over which they wander freely. Occasionally a boy runs away, but no strenuous measures are taken to recover him. Both at Waverley and Templeton freedom of action is deemed essential to a boy's development. A runaway can almost always be traced to a hasty word uttered by an attendant, or to some imagined slight the boy feels. The boy who runs away at Templeton rarely gets farther than Gardner or Fitchburg. The police easily recognize a feeble-minded boy in a strange place.

There is much closer supervision over the girls than over the boys. No female has ever escaped. A few boys get away every year, and are not apprehended. If the escape is in the day time, the boy is generally found by one of the hired men on the place, or stopped by the gatemen at the railroad crossings or by the police of adjoining towns. A great many conspiracies to run away are gotten up among the girls, but some one of them is always conscience-stricken, and gives information of the plot to an attendant. There are about 100 full-grown young feeble-minded women, whose care, and that of large numbers more who must soon be added to the 100, has become a leading feature of the school. They are truly feeble-minded, but well trained, at work in the laundry, in the kitchens, as nurses for the little children, as waitresses, as doing domestic work generally. In connection with these 100 full-grown simple-minded women there are some twenty female moral imbeciles in the school, whose influence upon the harmless simpletons is exceedingly bad, and for

whom a separate home should be provided. In regard to the female moral imbeciles, their offence — their affliction, I suppose I should call it, to be in accord with Dr. Fernald and the other experts — is in the first place wantonness and indecency, and then the general restlessness, ever increasing, that follows their restricted lives. Their influence upon the school is alarming. Not only is it bad upon the well-trained, good-natured, industrious, harmless feeble-minded girls, with whom they must be associated in their work, but it is bad upon the attendants. I have shown you how much the attendants have to do with keeping our boys and girls contented and happy, how much they have to do with keeping them from running away. The great success of our school has been because the female attendants have had their hearts in their work. But let a young woman have charge of these moral imbeciles, and she must be ever on her guard lest she suffer some indignity from them. Her fine sensibilities soon become hardened, and she is no longer a fit person for the care of the feeble-minded. On this subject my feelings are strong. It is many years since I became deeply interested in our big girls just arriving at womanhood, who must pass their lives apart from the world. I have been largely instrumental in preparing a happy home and occupation for them, but if these would-be strumpets are to mingle freely with them, I feel that my labors have been in vain.

Rev. Payson W. Lyman, trustee of State Farm: —

Because of the criminal character of the patients at the Asylum for Insane Criminals, most of whom are under sentence and most of whom would be reported “dangerous,” there is very little “parole” granted the patients; very few indeed are allowed outside prison walls, and there have been very few escapes. The sensational escape this year of 2 persons was given very wide publicity. This was attended with much alarm to the general public because of the reported character of the principal escaped man. Every possible effort consistent with the safe custody and the proper discipline of the others was made to secure the men who had escaped, but without avail thus far, though there was very wide co-operation by the police authorities. Not all the men in the asylum are of the class who would

be dangerous to persons even if they should escape and remain abroad; still, they must be securely guarded.

The co-operation or connivance of attendants in escapes of the insane is a grave offence, and merits penalty; but, judging by the reports of hospital physicians now given, the matter is not practically very urgent. I should rather delay a move for legislation making such connivance or co-operation a penal offence until some time when the public mind has not been recently agitated by two or three sensational escapes, though not all of these, if any, were aided by attendants.

The subject discussed at the conference in May was: Reception of patients at institutions: (1) Where and how are they received? (2) Provision for observation and examination of new patients. (3) Description of receiving wards; number and class of patients in each. (4) What measures are useful in relieving the initial shock of new surroundings? (5) How soon after admission does the physician see new patients? (6) Is there need at each hospital of a reception house for first care and observation of new patients and for longer treatment of special cases? (7) Would it be advisable to encourage admission of voluntary patients? (8) Other aspects of the subject.

The discussion was opened by Dr. George T. Tuttle, superintendent of the McLean Hospital, who spoke as follows: —

The reception of patients should be such as to lessen so far as is possible the apprehension which some people have at the thought of going to a hospital, and especially to a hospital for mental diseases. It is of great assistance in meeting the patient to have had a brief preliminary history, which at the McLean Hospital is almost invariably obtained, in order to determine whether proper accommodations can be furnished. On arrival the patient usually comes to the reception room of the administration house, and is there met by one of the physicians, who in a brief interview confirms as well as may be the impression received from the preliminary history. The supervisor is called and introduced to the patient and the accompanying friends, and then goes with them to the patient's room. If for any reason it may be better for the patient to go directly to one of the

other houses, instead of to the administration house, the supervisor meets the patient there and introduces him to the head nurse and the nurse who is to be in immediate attendance.

At this point there has grown up a difference of procedure with men and women. The women, as a rule, if the bodily temperature is not over 100° F. and there are no signs of serious exhaustion, are given a bath, a light lunch, and put to bed; while the men are not, unless their physical condition is such as to demand it. The supervisor offers to take the patient's knife and valuables to be put in the hospital safe. If he objects, no effort is made to take them by force; but a report is made to the physician, and a nurse is kept constantly with the patient until evening, when he takes a bath and retires early, to enable the physician to make a physical examination.

In the case of both men and women the nurse fills out a blank with the height, weight, pulse, temperature, respiration, condition of the bowels, whether or not a bath is given and a specimen of urine sent to the laboratory, which blank reaches the medical office the next morning. Charts are begun at once, by the nurse recording morning and evening pulse, temperature and respiration, the number of hours of sleep in each twenty-four, the stools, the weight each week, and a daily record of the nurse's observations of the patient, all of which are filed with the case record, and are often of great value to the physician.

A patient at first is not left alone. If the supervisor is told that he is depressed in spirits or is suicidal, a nurse is always in attendance until otherwise directed by the physician, by night and day, for care, companionship and observation. There is no doubt that the presence of the nurse is a comfort to most patients.

The physician sees the patient within two or three hours, and sooner if the history indicates that it is necessary; for, besides the preliminary history, a more careful and extended account is obtained from the family or friends who come with the patient.

By the next day the physician who has charge of the clinical records sees the patient, and with the advantage of a knowledge of his history makes a very careful mental and physical examination. He is accompanied by a junior assistant physician to take notes as the examination proceeds, and also a stenographer

if a verbatim report of the patient's conversation is desired. All the men whose condition will allow are taken to the laboratory for this examination, and from time to time thereafter. It is of course well understood that laboratories are merely places for a more careful and extended observation of patients than can well be made at the bedside. Some of these observations, involving physiological chemistry and bacteriology, must necessarily be made there; while others, directed to determining the states of attention, apprehension, comprehension, memory (visual and auditory), general sensation, the special senses, the reflexes, reaction time, etc., are better made where instruments of precision are collected. All patients, both men and women, welcome this extended and careful study. It emphasizes the fact that they are in a hospital, and that the physicians are trying to help them.

Many on admission are found to be in a condition of more or less exhaustion, from worry, want of food and sleep; and it has for a long time been the custom to keep them in bed for a few days, and during the morning for a longer time, as a means of treatment. If the patient does not have a special nurse, as many do, special nursing attention is given until the patient is accustomed to surroundings and is acquainted with nurses and other patients.

The purpose of all this is to lessen the shock of coming to a hospital, to learn as quickly as may be all that can be learned about the patient for use in his proper care and treatment, and also, if possible, to add something to our knowledge of insanity.

As to receiving wards, two houses for quiet patients have each two bedrooms and a sitting room quite secluded from the rest of the house, where recent cases can be taken, if not noisy, and observed for a longer or shorter time, perhaps two or three weeks, when they can be placed where they belong in wards with more patients.

These are quite useful, but are only for the quiet cases; and I have often thought it would be a great help in our work if we had a house for men and another for women which would accommodate 4 or 5 patients, where the partially disturbed patients could be put, — those who are in such condition that they cannot be associated with the convalescing, but are too well to

be with the excited patients. There they could be treated individually, and perhaps might recover without appreciating the nature of their illness or how sick they had been. Still, our houses are so small, our wards accommodating from 10 to 17 patients with a separate room for each, with the exception of two houses where two sitting rooms are used as dormitories, that it is not very difficult to find a proper place for each patient.

In a large hospital, as a matter of economy in the nursing service as well as for the better care of the patients, it would be well to have a reception ward or house, although I am quite sure that all patients should not be put in one house when they first come to the hospital. The public apparently does not know, but the hospital physician does, that patients are not classified according to their disease and whether acute or chronic, but according to their behavior. Some are objectionable; some are not. Any reception house would need to be large and have many divisions to receive and admit of a proper classification of all the patients admitted.

I visited the women's department of the Manhattan State Hospital a short time ago, and saw with great interest the provision for the reception and care of some excited patients. They were in two cheaply built wooden houses or sheds of one story, which held 25 beds each, with a bath tub in a projection on the back at one end and a toilet in a similar projection at the other. The front of the building is glass, and the windows are open most of the time. In each building there are 5 nurses for the 25 patients. I was told that they did better and that their excitement was less than in any house where they could be put. The reason seemed to be that they were close to the river, and could see all the boats passing, which was a great diversion. The physicians were quite enthusiastic over it. It certainly is also economical.

In regard to voluntary patients, there is no doubt in my mind that this method of admission should be encouraged. There is a certain infelicity in the commitment of a sick person to a hospital by a process of law, although it may be necessary for the protection of the friends and of the hospital. It often is a comfort to the superintendent that the patient is committed to

his care by authority of the court; but the voluntary basis is better for the patient, who, if he appreciates the situation, feels better while in the hospital, and after discharge has the satisfaction of knowing that he has not been adjudged insane. The recent change in the law regulating the voluntary admission of patients is wise, and a much larger number could safely be so admitted to our State hospitals. At the McLean Hospital 42 per cent. of all admissions during the last fifteen years were voluntary.

Dr. Chas. W. Page, superintendent of Danvers Hospital: —

At Danvers of course we have a great many patients thrust upon us any time of the day and night, and we cannot expect preliminary reports and preliminary information. The practice at Danvers is as follows: There are three assistant physicians on the male side and three on the women's side who have regular service in a certain number of wards, and those six assistant physicians receive the patients, and they not only receive them, but they are responsible for their record, etc., in rotation, in order that there may be no favoritism and no question of privilege. The names of the assistants are arranged in tablet form in the office. As a patient comes in, his name is placed in the first place, the second in the second blank space, so that the usher knows which one of the assistant physicians is going to be responsible for the reception and history of the incoming case; and when word comes that a female or a male patient is ready, the tablet shows which physician is to be called. It does not make any difference whether the case is likely to go on the ward which the physician who receives it has charge of, or not. They are assigned to the ward according to their condition, but the physician who sees the patient first is expected to write up the history of that case. There begins a systematic study of that case from the time the patient enters the hospital. When the necessary preliminary steps have been taken, the patient is assigned to a ward; and, although another physician has charge of the ward, the one who receives the patient has to follow that case up until it is presented to the daily staff clinic. Every case is presented before the staff in the form of a clinic, and is presented by this physician who receives the case. When

a physician has all the facts that are to be obtained about the case, and has made a study of the mental and physical condition (and has written it all out, — his diagnosis and prognosis), then he has the privilege of bringing the case in. Each morning it is decided who shall bring in his case the next day.

As a rule, the patients are not thoroughly examined until the morning following the reception. If the case demands immediate attention, the physician follows it right up after he has sent the case to the wards; but as a rule these cases are sent to the ward, given a bath, note is made in regard to any peculiarities, — marks, bruises, deformities, etc., and the patient is put to bed and expected to stay there until the physician has seen him. Men and women are treated practically alike. Of course some patients will not stay in bed, but if disturbed they are put in a room under observation. In the back ward we have a room with a full glass window, where a nurse can keep watch of a patient who is more or less disturbed.

It has become the practice to assign patients to one of three wards, according to the condition. Three, or at the outside four, wards receive all our new cases. The nursing staff on those wards is assigned to duty with some reference to the fact that they will have the new cases and the ones requiring special observation. Those wards will accommodate as a rule about 50 patients. I have long since been firmly convinced that it is no great kindness to insane people to isolate them, to put them in single rooms or detached buildings. I don't believe in isolating them, even with private nurses.

Our receiving wards are largely copied after the receiving wards of a general hospital. The beds are arranged in an open ward or in a smaller annex where there are a dozen beds, and in those places they do fully as well as anywhere. Of course many are in single rooms, right next to these, with the door open. The majority stay there until they either become disturbed and have to go on a back ward, or are removed to a front ward where there is less restriction.

The question of relieving the shock of new surroundings is one we cannot pay very much attention to; we have to put the patients where we can. The only thing we can do is to give

them the assurance that we are friendly; and those who have charge of the acute cases, I am satisfied, show a good deal of tact, and make friends and get the good-will of the patient.

In regard to voluntary patients, while I would not wish to see the law changed, because there are cases that fit into that class very well, as a matter of fact in my experience at Danvers there are very few patients who are proper ones to come in under that heading. We have had a great many come into the hospital as voluntary patients by special request of friends, physicians, etc., but the majority have sooner or later demanded dismissal, and at a time when we could not advise it or the friends could not approve of it; and the upshot has been that we have had to send out and get physicians and have them committed, and that process places us in the minds of the patients in the attitude of opponents, and the end of the matter is a good deal worse, as far as our relation to such patients is concerned, than if they had been committed at first. Every one has felt indignant at times that friends have sent patients to the hospital under a wrong impression. If they come as voluntary patients, and the hospital officers have to turn around and have them committed, it puts the hospital authorities in about the same position as the friends who deceive patients to get them to the hospital.

While we have a few voluntary patients who are doing well and are sensible enough to appreciate the privilege, the majority are not, in our opinion, the ones who will be benefited by such leniency in the institution.

In regard to special detention hospitals, I should say that in my opinion it is the ideal scheme for the insane hospital; but to make some of our old established hospitals ideal hospitals is another story. While some could easily be remodelled to fit those requirements, I do not think Danvers is one where this idea could be applied with special propriety. As a new departure from the beginning it would be economical. A good many of the buildings could be of a more economical style of construction; and I can easily conceive how I could build a much more efficient hospital by having one special building for reception wards and others for secondary treatment. I could do more

with the same amount of money. The advantage would be that the general hospital idea could be more fully adapted, and the nursing force could be better trained, better disciplined, better developed, so that a good many patients would get well and go away absolutely unacquainted with the established features of the old-time lunatic hospital; but at the present time I do not think such a detention ward is absolutely called for at Danvers.

Mr. Samuel W. Hopkinson, trustee of Danvers Hospital: —

I do not feel that a patient is going to be shocked in being admitted to a hospital. If there is any shock, he is going to meet it before getting there. One practice should be discouraged, and that is telling them that they are going to a hotel, or here or there. Better to tell them where they are going, than to deceive them.

I believe in voluntary patients to a certain extent. I have one in mind, now out of the hospital, who says that if he thought he needed treatment again, he should go as before.

Dr. H. M. Quinby, superintendent of Worcester Hospital: —

Our methods at the Worcester Hospital are much the same as those described by Dr. Tuttle, being modified of course somewhat by the size of our establishment, the greater number of our commitments and the character of many of the patients for whom we have to provide.

On arriving at the hospital the patient is received by one of the senior physicians, and assigned, if possible, to one of the infirmary wards, where special provision is made for the reception and care of such cases. These wards are, as most of you know, comparatively new. They were designed and are conducted on the lines of a general hospital, and have proved to be admirably adapted to the purpose for which they were built, — the treatment of our acute cases. Each ward has nine beds with three single rooms, and the only objection thus far found with them is that they are not large enough to meet the demands made upon them. The single rooms are so arranged that a case of acute mania can be cared for without disturbing the rest of the ward. As a rule, however, the more violent and disturbed cases are assigned to a ward by themselves. The ward originally designed for this purpose and the only one at present

available is unfortunately generally overcrowded, and has few of the facilities which according to modern ideas are essential for the best and most economical care of such cases, but with certain alterations it has been made fairly serviceable.

As far as possible, we put all of our new patients in bed under the care of a nurse immediately on admission, and keep them there for twenty-four hours, at least or until we have had an opportunity to make a thorough physical examination of the case. If necessary, they are seen at once by the physician.

This method of treatment goes, I think, a great way towards lessening any shock from their new surroundings. It gives an opportunity for more careful observation, better facilitates the physical examination, and makes in most cases a distinctly favorable impression upon the mind of the patient. He comes to feel that he is in a hospital; that, however much in error we may be in thinking that he is in need of medical care and attention, we at least are trying to do something for him.

The provisions at Worcester for the first care and observation of new patients can, I have no doubt, be improved upon; but they are, I believe, on the whole fairly adequate, with the exception of that for the more excited cases, and this can easily be brought up to modern requirements with a very moderate expenditure. To provide a reception house, however, would be somewhat difficult in connection with the present building, and if built would almost of necessity take the form of a separate hospital.

One of the arguments in favor of such a house, and one which we hear frequently urged, is that we thereby avoid the ill effects supposed to come from an association of the acute insane with the chronic cases. That such contact is in some cases undesirable there is not the least doubt, but my experience would lead me to regard this as an exception rather than the rule.

Insane people are in the majority of cases so absorbed in their own trials that they give little heed to what goes on about them. The things of which they complain are not the things they actually see and hear so much as the things which they imagine they see and hear. We forget, in considering this matter, that quite as undesirable associations are likely to be found among the acutely insane as among the chronic; and that small

institutions, lacking as they must in means for classification and the opportunity for the transfer of harmful cases, are likely to be more hampered in this direction than the large hospital, with its abundant means for classification.

We are very seldom asked to receive a voluntary patient at Worcester, — not oftener than once a year. There was so much red tape connected with the old law in reference to voluntary commitments that the Worcester trustees voted some years ago not to receive any patient unless he came committed by the court. Whether this action on their part has anything to do with the small number of applicants I doubt, as no effort was made to have their vote generally known.

Dr. Owen Copp, executive officer, State Board of Insanity: —

Our public hospitals are large and steadily growing. They receive many patients of all classes and conditions, and have to meet many difficulties in treating each class and individual with discrimination. Moreover, their financial resources are not always sufficient to maintain the highest standard. But in reviewing my experience I think that great progress has been made in these directions, so that it seems inevitable that the needs of the patient and the duty of service to the public will become ascendant at any necessary sacrifice of convenience or expense of administration of institutional affairs.

Our structural arrangements for the reception of patients are deficient in most of our hospitals. With few exceptions, the new patient must go immediately to a large ward, into association with 25 to 50 other patients of very diverse characteristics. To many this may matter little, but to others it is a great shock. In most of the hospitals there are wards distinctively for curable cases, but most of their inmates are incurable, and have been many years resident there. Although their mental condition and conduct may not be more objectionable than those of the curable, the new-comer is profoundly depressed by the fear that a like fate of prolonged detention may be awaiting him. No assurances to the contrary can avail to expel such apprehension. The experience of those who have made this distinction between the curable and incurable classes confirms its great desirability in a large public institution. Of course no one ward or one building would suffice for this purpose. The same prin-

ciple of classification according to condition and behavior must prevail both in the curable and incurable groups, and there must be constant interchange between the two, to preserve the distinctive character of each. Existing hospitals have large wards, which do not admit of adequate separation of classes. These cannot be reduced in size, but additional ones may be provided in separate buildings at a sufficient distance from the present plant to afford suitable separation of the acute hospital unit. Efficiency and economy of administration would be promoted by such a departure. The acute hospital unit would become the center of scientific and research work, would have a relatively large medical staff, and would be the seat of a training school for nurses. These functions would, to a large extent, be withdrawn from the main institution, greatly simplifying and reducing the expense of its management. The saving on the many (90 per cent.) would counterbalance the larger expenditure necessary in the treatment of the few (10 per cent.) in the acute hospital.

I was particularly impressed with the special provision made in Scotland for receiving new patients. Nearly all the district asylums have special and separate buildings for this purpose. The most extreme example is found at the Royal Crichton Asylum, at Dumfries, where a reception hospital has been provided in the pauper department for new patients of each sex. They are received at a separate entrance, and immediately pass into the care of a nurse. They retire at once into a set of apartments consisting of a receiving room, bath room and bed room connecting with each other. The patient, after receiving a bath and the necessary attention of the nurse, is put to bed. Meanwhile the physician has taken the friends to his office and obtained the patient's history. He then proceeds to make a careful mental and physical examination of the patient. If the patient's condition requires, he remains in the bed room with a special nurse; if not, he is put to bed in one of several small wards, according to his condition, where he remains so long as necessary.

A greater use of the voluntary form of admission would tend to remove the popular impression that the insane hospital is a place of detention rather than treatment. The legal formalities

of the court commitment confirm this misconception. The possession of absolute authority over a patient encourages the use of coercive measures when persuasion and tact might avail. On the other hand, the voluntary relation eliminates the idea of restraint, brings the patient into the right attitude toward the hospital, and under the most favorable conditions to benefit from treatment. Its wider application would seem to be desirable in the interests of the patient.

Dr. Tuttle: To my mind the chief objection to hospital treatment for the insane is the association with other sicker, perhaps demented, patients. Those who are capable of appreciating their surroundings should not have constantly before them those wrecks of humanity, who suggest the thought, "Shall I be like them?" I would save as many as possible from this. Patients received, as I have indicated, are looked after individually for a time, and are gradually introduced to other patients who are congenial, for the companionship which they need.

In regard to voluntary patients, if one wishes to go, the law is explained to him, and he can make the written request for discharge; but, with the probability of a judicial inquiry following his demand if he evidently is unfit to leave the hospital, he usually does not insist on it. Of all our voluntary patients, only about 3 a year demand discharge against the advice of their friends and physicians.

Dr. George S. Adams, superintendent of Westborough Hospital: —

I am very glad to say something on the subject of voluntary cases. From the time the Westborough Hospital was opened there has been a willingness to receive such patients, and they have come to us freely. We have found no disadvantage owing to their wanting to go away soon after they come. Most of them stay until we think it wise for them to leave. We have had so far in the present hospital year I think 25 voluntary admissions, which is about 10 per cent. of all the admissions. Under the new law permitting voluntary cases to be admitted chargeable to the State there has been no difficulty whatever. I have admitted 3 under that law. I admit them, then make a report to the State Board of Insanity, asking that they be allowed to remain chargeable to the State. One has gone away, while 2 are

with us still. We also receive insane persons as voluntary cases if they wish to come and remain for treatment, and we have them remaining for months. Once in a while a patient will say, "I want to go away, and wish to put in my notice." No restriction is made upon their so doing. I am always particular when voluntary patients are admitted to explain their rights, and tell them that they can put in their notice to go in three days; and where the friends, as they sometimes do, insist upon the patient remaining when the patient does not care to do so, I decline to receive them. There is very little satisfaction with unwilling patients. Most of the voluntary cases are over in our building for acute quiet cases.

We have now a building for disturbed patients who are recent cases and quiet patients who are recent cases, and when new cases, first admissions to any hospital, are received, and there is a little doubt as to where they should go, we always send them over to the building for acute cases, where they are studied and are usually not changed until after two or three weeks' observation and treatment.

In the main hospital we have receiving wards to which all but the very much disturbed cases go. There we have our best and kindest nurses to look after them, and the physician always sees them two or three hours after admission.

Dr. Copp: Would you keep a general paralytic or senile case in the new Codman house?

Dr. Adams: I send them where they belong. Cases of dementia præcox I send to Codman or Talbot building, where they will receive the benefit of individual treatment.

Dr. Copp: Do you find it an advantage to have a separate building?

Dr. Adams: I find it a great advantage. In the building for acute cases patients are sometimes disturbed, and fear they are not going to get well; and some one tells them that they would not have been put there if the doctors did not expect them to get well.

I think the majority of the cases never go to the main hospital. Acute disturbed cases go to the Codman building, and when they become quiet or convalescent they go to the Talbot building and are discharged from there.

Dr. Arthur V. Goss, assistant physician, Taunton Hospital: —

Our method of receiving patients at Taunton differs very little except in some details from those at Danvers and Worcester. The patient is always received by the house physician who happens to be on duty in the general hospital office, who questions the friends and the patient also in regard to certain main facts that every physician and hospital wants to know, and from what examination and observation can be made in the office decides as to which of three wards the patient shall go, — to the ward for excited and suicidal patients, the ward for general paralytics and agitated senile cases, or to the third, which we regard as our acute ward, which is modeled after the wards of a general hospital. All of the patients on this ward with the exception of ten or a dozen have a bed upon the open ward.

In regard to measures for relieving the initial shock, Dr. Brown's opinion is that one of the chief elements is the sympathetic attitude of the physician and nurses who first receive the new patient. After a patient goes to the ward, the pulse, temperature and respiration are taken; and if the temperature is in any degree above the normal, the supervisor consults the physician as to what further treatment the patient shall receive before doing anything more on her own responsibility.

In regard to the great number of patients who are brought to the hospital who have been deceived by friends, this complicates the matter for the physician and for the patient. We tell them frankly the nature of the institution to which they have come, and that they have come for treatment, and we have found that that has in some degree diminished the initial shock.

In regard to a reception hospital, Dr. Brown is of the opinion that our present facilities for receiving new patients are inadequate, and that additional accommodations are needed.

It has never been the custom for Taunton to receive voluntary patients. However, Dr. Brown thinks it is a proper thing to encourage the admission of voluntary patients if a careful discrimination is made.

Dr. George F. Jelly, chairman of the State Board of Insanity: I would like to ask what proportion of the patients received at the hospital have been deceived? in how large a pro-

portion has deception been used in getting them into the hospital?

Dr. Quinby: It is very common; a great many have been deceived.

Dr. Edward French, superintendent of Medfield Asylum:—

The asylums receive their patients by transfer from other institutions, and we receive a history with them. I receive all the patients personally if I am at home; if not, my first assistant.

The one thing in our method of procedure which is peculiar to the institution is our way of conveying the necessary intelligence to the head nurse in a building to which the patient is assigned. We have a transfer card. The patients are received in the reception room. Each patient is weighed, the color of hair and eyes taken, any peculiarities or deformities are noted, all of which is put on this transfer card, so that there is a complete personal description of the patient. In addition, what I may call the common conduct of the patient is also written on this card, — what he is most likely to do, then other facts which it would be important for the nurse to know, — “requires to be fed,” “requires to be watched constantly,” “requires to be taken to the toilet,” — such facts as we glean from the history or from the friends of the patient. In this way the nurse always has a little synopsis of what the patient is likely to do. These cards are for identification, and they serve a good purpose in acquainting the nurse at once with the characteristics of the patient.

Dr. Page: In regard to the number who are deceived, I should not say from my experience in Danvers that more than one-fifth are brought there under erroneous explanations.

Dr. Quinby: It has been our custom of late years to open the hospital on visiting days to the friends of patients and to take them freely into the wards.

Dr. Tuttle: There can be no doubt of the advantage of a proper publicity in the treatment of the insane. In earlier days it was thought better to separate the patient completely from his family, and it was not uncommon for him to have been in the hospital for six months before they were allowed to visit him. This apparent secrecy was one of the causes of the suspicion which the public had for hospitals for the insane. If his friends

have seen him from day to day during his illness they know what his condition has been and can estimate better the correctness of his statements if he leaves the hospital before he is well, and has misinterpreted the efforts of those who have tried to care for him. Discreet friends by their frequent visits can also be of great assistance to the physicians.

Dr. Jelly: This question of secluding patients, in 1869-70, was a very strong point. Dr. Tyler for a long time considered that every insane patient with certain delusions should be secluded absolutely from all associations connected with his former life. It was not unusual for a patient to be kept entirely secluded from his friends for a year, — no letters, no association whatever. That became modified afterwards, and the whole thing is changed with our greater knowledge and experience. I believe most thoroughly that the free communication with friends, under certain limitations, is much better than such seclusion.

Dr. O. F. Rogers, trustee of Danvers Hospital: —

Dr. Butler of Hartford began seventy years ago to treat the insane. When I was under him he had been in the business about thirty-five years, and as the youngest I had to take friends of patients about. I found I was taking about those who were there simply from curiosity. He used to say: "It is a good thing for this hospital to have visitors; we have nothing to conceal, — the public think we have. We can enlighten them by letting them see. If you were shut up here, would you not like to have the public come in? I guess you would get as much amusement out of it as they. It helps the public, it helps the institution, and I am not sure but what it is curative to the patient." For many years after he began at South Boston he used to keep the patients secluded six months to a year; finally, at Hartford, during the later years, he got more lenient, and doubted very much the wisdom of complete isolation and did not insist upon it. He would often say weeks when he used to say months. The institution was immensely popular in Connecticut, and he attributed its popularity to the fact that he had a good hospital, and everybody could come and see it.

NEW LEGISLATION.

General legislation relative to the institutions and persons under the supervision of the Board of Insanity was enacted by the Legislature of 1906, as follows:—

[ACTS OF 1906, CHAPTER 184.]

AN ACT RELATIVE TO THE ANNUAL REPORT OF THE STATE BOARD OF INSANITY.

Be it enacted, etc., as follows:

SECTION 1. Section four of chapter eighty-seven of the Revised Laws is hereby amended by striking out the word “except”, in the fifth line, and inserting in place thereof the word:—including,—so as to read as follows:—*Section 4.* The report shall contain a properly classified and tabulated statement of the receipts and expenses of the board, and of each of the several state institutions under its supervision for said year, and a corresponding classified and tabulated statement of their estimates for the year ensuing, including estimates for the ordinary expenses, with its opinion as to the necessity or expediency of appropriations in accordance with said estimates; a concise review of the work of the several institutions under the supervision of the board, for the year preceding, and such suggestions and recommendations as to said institutions and as to the general interests of all persons under its supervision as it considers expedient, and information embodying the experience of this country and other countries, relative to the best and most successful methods of caring for such persons as come under the supervision of the board.

SECTION 2. This act shall take effect upon its passage. [*Approved March 21, 1906.*]

[ACTS OF 1906, CHAPTER 471.]

AN ACT RELATIVE TO THE EXPENSES OF COMMITMENTS OF INSANE PERSONS IN CERTAIN INSTANCES.

Be it enacted, etc., as follows:

SECTION 1. Section forty-nine of chapter eighty-seven of the Revised Laws, as amended by section one of chapter four hundred and seventy-five of the acts of the year nineteen hundred and five, is hereby further amended by adding after the word “institution”, in the fourteenth line, the words:—or, if such person before his commitment to or confinement in any of the above named institutions was not an inhabitant of any county, such expenses shall be paid by the county in which such person was committed or from which he was sent to such institution; and the necessary expenses of returning to a public institution a person temporarily absent therefrom, under the provisions of

section ninety-five of chapter eighty-seven of the Revised Laws, as amended by chapter four hundred and thirty-five of the acts of the year nineteen hundred and five, may in like manner be paid by such county, if a new commitment of said person would otherwise be necessary, — so as to read as follows: — *Section 49.* All necessary expenses attending the apprehension, examination, trial or commitment of an alleged insane person shall, if the commitment is to a state insane hospital, county receptacle or the Boston insane hospital, be allowed and certified by the judge, and presented as often as once a year to the county commissioners, who shall examine and audit the same; and they shall then be paid by the county of which the alleged insane person is an inhabitant or, if an inmate of any public institution for the insane, feeble-minded, epileptic, dipsomaniac or inebriate, of the state hospital or the state farm, be committed to any such institution, such expenses shall be paid by the county of which such inmate was last an inhabitant before his admission to the institution; or, if such person before his commitment to or confinement in any of the above named institutions was not an inhabitant of any county, such expenses shall be paid by the county in which such person was committed or from which he was sent to such institution; and the necessary expenses of returning to a public institution a person temporarily absent therefrom, under the provisions of section ninety-five of chapter eighty-seven of the Revised Laws, as amended by chapter four hundred and thirty-five of the acts of the year nineteen hundred and five, may in like manner be paid by such county, if a new commitment of said person would otherwise be necessary. If application is made for commitment to any other asylum, hospital or receptacle, the expenses shall be paid by the applicant or by a person in his behalf.

SECTION 2. This act shall take effect upon its passage. [*Approved June 9, 1906.*]

[ACTS OF 1906, CHAPTER 472.]

AN ACT RELATIVE TO THE EXAMINATION OF ALLEGED INSANE PRISONERS.
BY THE STATE BOARD OF INSANITY.

Be it enacted, etc., as follows:

SECTION 1. Section one hundred and one of chapter two hundred and twenty-five of the Revised Laws is hereby amended by inserting after the word “one”, in the fifth line, the words: — or both, — by striking out after the word “and”, in the eighteenth line, the words “notice shall be given”, and inserting in place thereof the words: — shall give notice accompanied by a written statement regarding the mental condition of said prisoner, — and by striking out after the word “receive”, in the twenty-fourth line, the words “three dollars a day for his services for each day so employed and his actual travelling expenses”, and inserting in place thereof the words: — for his services four dollars for each examination and twenty cents for each mile travelled one way, — so as to read as follows: — *Section 101.* The state

board of insanity shall designate two persons, experts in insanity, to examine prisoners in the state prison, the Massachusetts reformatory or the reformatory prison for women, who are alleged to be insane. If any such prisoner appears to be insane, the warden or superintendent shall notify one or both of the persons so designated, who shall, with the physician of the prison, examine the prisoner and report to the governor the result of their investigation. If, upon such report, the governor considers the prisoner insane and his removal expedient, he shall issue his warrant, directed to the warden or superintendent, authorizing him to cause the prisoner, if a male, to be removed to the state asylum for insane criminals, and if a female, to be removed to one of the state insane hospitals, there to be kept until, in the judgment of the superintendent and trustees of the hospital to which the prisoner has been committed, he or she should be returned to prison. When the superintendent and trustees determine that the prisoner should be so returned, they shall so certify upon the warrant of the governor, and shall give notice accompanied by a written statement regarding the mental condition of said prisoner to the warden or superintendent of the prison, who shall thereupon cause the prisoner to be reconveyed to the prison, there to remain pursuant to the original sentence, computing the time of his detention or confinement in the hospital as part of the term of his imprisonment. The person who makes such examination of a prisoner shall, if he is not a salaried officer of the state board of insanity, receive for his services four dollars for each examination and twenty cents for each mile travelled one way, which shall be paid from the annual appropriation of the prison in which the prisoner is examined.

SECTION 2. This act shall take effect upon its passage. [*Approved June 9, 1906.*]

[ACTS OF 1906, CHAPTER 324.]

AN ACT RELATIVE TO THE EXPENSE OF REMOVING PRISONERS.

Be it enacted, etc., as follows:

SECTION 1. The expense of removing a prisoner to or from a state institution by order of the prison commissioners shall be paid upon bills approved by said commissioners, out of the appropriation for the removal of prisoners, except that when a removal is made at the request of the trustees of any institution, or upon the certificate of a prison physician on account of illness, the expense thereof shall be borne by the institution from which the prisoner is removed. The expense of removing a prisoner to the state asylum for insane criminals or to a state insane hospital, shall be paid by the prison from which the prisoner is removed.

SECTION 2. All acts and parts of acts inconsistent herewith are hereby repealed.

SECTION 3. This act shall take effect upon its passage. [*Approved April 28, 1906.*]

[ACTS OF 1906, CHAPTER 418.]

AN ACT RELATIVE TO OATHS OF PHYSICIANS IN MAKING CERTIFICATES OF INSANITY.

Be it enacted, etc., as follows:

SECTION 1. Section thirty-five of chapter eighty-seven of the Revised Laws is hereby amended by striking out the words "to the judge at the hearing", in the second line, and by striking out the word "is", in the eighth line, and inserting in place thereof the word: — are, — so as to read as follows: — *Section 35.* A physician shall not make a certificate of insanity unless he makes oath that he is a graduate of a legally chartered medical school or college, that he has been in the actual practice of medicine for three years since his graduation and for three years last preceding the making of said oath, and that he is registered in accordance with the provisions of chapter seventy-six, nor unless his standing, character and professional knowledge of insanity are satisfactory to the judge. A physician who makes such certificate shall have examined the alleged insane person within five days of his signing said certificate, and shall state therein that in his opinion such person is insane and a proper subject for treatment in an insane hospital or asylum, and the facts on which his opinion is based. A copy of the certificate, attested by the judge, shall be delivered by the person making the commitment to the superintendent of the hospital or other place to which the person shall be committed, and shall be filed and kept with the order of commitment, and within forty-eight hours after the commitment of an insane person to an insane hospital or asylum, the superintendent thereof shall transmit to the state board of insanity a copy of such certificate. A certificate bearing date more than ten days prior to the commitment of any person alleged to be insane shall be void, and no certificate shall be valid or be received in evidence if signed by a physician holding any office or appointment in or connected with a hospital, asylum or other place for the insane to which the alleged insane person may be committed.

SECTION 2. This act shall take effect upon its passage. [*Approved May 24, 1906.*]

[ACTS OF 1906, CHAPTER 517.]

AN ACT TO CONSTITUTE EIGHT HOURS A MAXIMUM DAY'S WORK FOR PUBLIC EMPLOYEES.

Be it enacted, etc., as follows:

SECTION 1. Eight hours shall constitute a day's work for all laborers, workmen and mechanics now or hereafter employed, by or on behalf of the Commonwealth, or of any county therein, or of any city or town which has accepted the provisions of section twenty of chapter one hundred and six of the Revised Laws; but in cases where a Saturday half-holiday is given the hours of labor upon the other working days of the

week may be increased sufficiently to make a total of forty-eight hours for the week's work.

SECTION 2. Every contract, excluding contracts for the purchase of material or supplies, to which the Commonwealth, or of any county therein, or of any city or town which has accepted the provisions of section twenty of chapter one hundred and six of the Revised Laws, is a party which may involve the employment of laborers, workmen or mechanics shall contain a stipulation that no laborer, workman or mechanic in the employ of the contractor, sub-contractor or other person doing or contracting to do the whole or a part of the work contemplated by the contract shall be required to work more than eight hours in any one calendar day.

SECTION 3. This act shall apply to all laborers, workmen or mechanics engaged upon any works which are or are intended to be the property of the Commonwealth, or of any county therein, or of any city or town which has accepted the provisions of section twenty of chapter one hundred and six of the Revised Laws, whether such laborers, workmen or mechanics are employed by public authority or by a contractor or other private person.

SECTION 4. Any agent or official of the Commonwealth or of any county, city or town who violates any provision of this act shall be subject to a penalty of fifty dollars for each offence.

SECTION 5. The provisions of this act shall not apply to or affect contractors or sub-contractors for work, contracts for which were entered into prior to the passage of this act.

SECTION 6. So much of any act as is inconsistent herewith is hereby repealed.

SECTION 7. This act shall take effect upon its passage. [*Approved June 22, 1906.*]

[ACTS OF 1906, CHAPTER 508.]

AN ACT TO ESTABLISH A SCHOOL FOR THE FEEBLE-MINDED.

Be it enacted, etc., as follows:

SECTION 1. The governor, with the advice and consent of the council, shall, during the month of July next, appoint seven trustees, two of whom may be women, in whom and in their successors shall be vested the government and management of the school for the feeble-minded established by this act. One trustee shall hold office for five years, two for four years, one for three years, two for two years, and one for one year, from the first day of August in the year nineteen hundred and six. Upon the expiration of the terms of the trustees, their successors shall be appointed by the governor and council, to hold office for a term of five years. Vacancies arising from death, resignation, removal or other cause shall be filled by appointment for the unexpired term only. Any trustee may be removed from office for good and sufficient cause by the governor with the advice and consent of the council.

SECTION 2. The trustees of said school shall have general charge of the same, and shall see that its affairs are conducted according to law and to regulations established by them. They shall appoint, as soon as may be, a superintendent as their executive officer, who shall be a physician, and who shall, when a suitable building is provided, reside at the school. They shall also appoint assistant physicians, of whom one shall be a woman, and a treasurer, who shall give bonds for the faithful discharge of his duties, with such other officers as they may deem necessary for conducting efficiently and economically the business of the school, and shall determine, subject to the approval of the governor and council, their salaries. They shall establish by-laws and regulations for the government of the school. They shall receive no compensation, but shall be reimbursed all expenses incurred in the performance of their official duties.

SECTION 3. There shall be thorough visitations of the school by two of the trustees thereof monthly, and by a majority of them quarterly, and by the whole board semi-annually, at each of which a written account of the condition of the school shall be prepared, which shall be presented at the annual meeting to be held in December, as provided by chapter two hundred and eleven of the acts of the year nineteen hundred and five. At the annual meeting a full and detailed report shall be made of the condition of the school and all its affairs, with a list of the salaried officers and their salaries, and a copy of the inventory required by law, which shall be laid before the governor and council on or before the third Wednesday in January, for the use of the government, as provided in said chapter two hundred and eleven. The treasurer shall, at the same meeting, present to the trustees his annual report. Both reports shall be made up to the thirtieth day of November inclusive. The trustees shall audit the report of the treasurer and shall transmit it with their annual report to the governor and council. The accounts and books of the treasurer shall at all times be open to the inspection of the trustees.

SECTION 4. The trustees of said school for the feeble-minded shall be a corporation for the purpose of taking and holding by them and their successors in trust for the Commonwealth any grant or devise of land, or any gift or bequest of money or other personal property, made for the use of the institution of which they are trustees, and for the purpose of preserving and investing the same or the proceeds thereof in notes or bonds secured by sufficient mortgages or other securities, with all the powers necessary to carry said purpose into effect; and they shall have authority to expend any gift or bequest, or any part thereof, in the erection of new buildings on the land belonging to said school: *provided*, that all such buildings shall belong to the Commonwealth and be managed by said trustees as a part of said school.

SECTION 5. The lands which may at any time be held by the trustees of the said school for the feeble-minded in trust for the Commonwealth

for the use of said school shall not be taken for a street, highway, railway or railroad, or for any other purpose without leave of the general court specially obtained.

SECTION 6. The buildings of the said school shall be provided with properly constructed iron fire escapes upon the outside thereof, accessible from the interior by doors or windows, with suitable landings at every story above the first, including the attic, if they are occupied as day rooms or sleeping rooms for the feeble-minded. They shall also be provided with suitable apparatus for the extinguishment of fire, so constructed and arranged as to be effectively used from the inside or outside of the buildings or parts thereof used for the accommodation of the feeble-minded. The trustees shall provide for a monthly inspection of the fire apparatus belonging to the school and for a proper organization and monthly drill of the officers and employees in the use thereof.

SECTION 7. An annual appropriation shall be made for the support of said school under the provisions of chapter one hundred and seventy-five of the acts of the year nineteen hundred and five.

SECTION 8. Said school shall be under the supervision of the state board of insanity, and said board shall exercise all powers and perform all duties relating to said school that are prescribed by law for institutions under its supervision.

SECTION 9. The said trustees are hereby authorized and directed, with the approval of the state board of insanity, and, after the approval of the state board of insanity has been given, with the further approval of the governor and council, to take by purchase or otherwise a tract of farming or other land suitable in their judgment for the establishment of a school for the care, instruction, custody and control of the feeble-minded, whether children or adults. Said tract may include buildings or chattels thereon. In the event of the taking of said lands and buildings by the said trustees they shall file in the registry of deeds for the county and district within which the same are situated a description of the lands and buildings so taken, with a statement, signed by said trustees or a majority thereof, that the same are taken under the provisions of this act in the name and behalf of the Commonwealth; and the act and time of filing thereof shall be deemed to be the act and time of the taking of such lands and buildings, and shall be a sufficient notice to all persons that the same have so been taken. The title to all lands and buildings so taken shall vest absolutely in the Commonwealth and its assigns forever. The Commonwealth shall be liable to pay all damages sustained by the owners of such lands or buildings by reason of the taking thereof. Said trustees shall have full power, subject to the approval of the governor and council, to settle by agreement or arbitration the value of the lands and buildings taken as aforesaid; and if not so settled the value shall be assessed by a jury at the bar of the superior court for the county in which the lands and buildings are situated, upon petition, to be filed in the office of the clerk of said court

by the persons owning said lands and buildings, within one year after such taking and not afterward.

SECTION 10. The trustees shall obtain plans, and, after they have acquired the land provided for by section nine of this act, they shall, with the approval of the state board of insanity, proceed to construct such buildings as may be required for the establishment of a school for the feeble-minded. They shall submit all plans for buildings to the state board of insanity for its approval, as provided by law for institutions under the supervision of said board, and shall not proceed to construct or repair buildings until such approval has been obtained.

SECTION 11. As soon as the said school is ready for the reception of the feeble-minded, the trustees shall give notice to the governor, who shall make proclamation that upon a given day the said school will be open for the reception of feeble-minded persons.

SECTION 12. If, upon application in writing, a judge of probate finds that a person is a proper subject for said school for the feeble-minded, he may commit him thereto by an order of commitment directed to the trustees thereof, accompanied by the certificate of a physician who is a graduate of a legally organized medical college and who has practised three years in this Commonwealth, that such person is a proper subject for said institution. If the judge is required to go from his office or place of business to make such commitment, he shall be allowed all necessary expenses of travel, which shall be paid, upon the certificate of the judge, by the county in which such application was heard.

SECTION 13. A person who intends to apply for the commitment of a feeble-minded person under the provisions of the preceding section shall first give notice in writing of such intention to the overseers of the poor of the city or town in which such feeble-minded person resides; but if such feeble-minded person resides in Boston, such notice shall be given to the institutions registrar instead of the overseers of the poor. Satisfactory evidence that such notice has been given shall be produced to the judge and shall accompany the order of commitment.

SECTION 14. Said school for the feeble-minded shall maintain a school department for the instruction and education of feeble-minded persons who are within the school age or who in the judgment of the trustees thereof are capable of being benefited by school instruction, and a custodial department for the care and custody of feeble-minded persons beyond the school age or not capable of being benefited by school instruction.

SECTION 15. Persons received by said corporation shall from time to time be classified in said departments as the trustees shall see fit, and the trustees may receive and discharge pupils at their discretion, and may at any time discharge any pupil or other inmate and cause him to be removed to his home or to the place of his settlement. They may also allow any inmate to be absent on a visit for not more than three months, and the liability of any person or place to said corporation for the sup-

port of such inmate shall not be suspended by reason of such absence unless, during such period, such inmate becomes a charge to the Commonwealth elsewhere.

SECTION 16. Said corporation shall gratuitously receive, maintain and educate in the school department such indigent feeble-minded persons from this Commonwealth as shall be designated by the governor upon the recommendation of the secretary of the board of education. The trustees may also at their discretion receive, maintain and educate in the school department other feeble-minded persons upon such terms as they may determine.

SECTION 17. The charges for the support of each inmate in the custodial department of said school shall be three dollars and twenty-five cents a week, and shall be paid quarterly. Such charges for those not having known settlements in the Commonwealth shall be paid by the Commonwealth, and may afterward be recovered by the treasurer and receiver general of the Commonwealth of such inmates, if of sufficient ability, or of any person or kindred bound by law to maintain them, or of the place of their settlement, if subsequently ascertained; for those having known settlements in this Commonwealth, either by the persons bound to pay or by the municipality in which such inmates have their settlement, unless security to the satisfaction of the trustees is given for such support. If any person or municipality refuses or neglects to pay such charges, or such amounts as may be charged and due for the removal of any inmate whom the trustees are authorized by law to remove, the treasurer may recover the same to the use of the school as provided in section seventy-nine of chapter eighty-seven of the Revised Laws. A city or town which pays the charges and expenses for the support or removal of a feeble-minded person admitted to said school shall have like rights and remedies to recover the amount thereof with interest and costs from the place of his settlement, or from such person if of sufficient ability, or from any person bound by law to maintain him, as if such charges and expenses had been incurred in the ordinary support of such feeble-minded person.

SECTION 18. This act shall take effect upon its passage. [*Approved June 21, 1906.*]

[ACTS OF 1906, CHAPTER 309.]

AN ACT RELATIVE TO INMATES OF THE MASSACHUSETTS SCHOOL FOR THE
FEEBLE-MINDED AND THE DEPARTMENTS THEREOF.

Be it enacted, etc., as follows:

SECTION 1. Any feeble-minded person now or hereafter an inmate of the Massachusetts School for the Feeble-Minded, or of any department thereof, whether by committal or otherwise, who shall have reached the limit of school age, or who, in the judgment of the trustees, is incapable of being further benefited by school instruction, or any such person who may have been or may be transferred from one department of said

school to another under the provisions of section one hundred and sixteen of chapter eighty-seven of the Revised Laws, if, in the judgment of the trustees and of the state board of insanity, the question of his or her commitment to or continuance in said school or any department thereof is a proper subject for judicial inquiry, may be brought before the judge of probate for the county of Middlesex, who shall thereupon determine whether or not such person is feeble-minded and shall duly commit such person to either department of said school, in the manner now provided by law, or shall direct his or her discharge, or shall make such other disposition of the case under the laws relating to insane persons as he may deem proper.

SECTION 2. This act shall not be construed to impair the power given to said trustees by section one hundred and sixteen of chapter eighty-seven of the Revised Laws to discharge any inmate of said school or of any department thereof. [*Approved April 23, 1906.*]

[ACTS OF 1906, CHAPTER 313.]

AN ACT TO CHANGE THE NAME OF THE NORTHAMPTON INSANE HOSPITAL
TO NORTHAMPTON STATE HOSPITAL.

Be it enacted, etc., as follows:

SECTION 1. The name of the Northampton insane hospital is hereby changed to Northampton State Hospital.

SECTION 2. This act shall take effect upon its passage. [*Approved April 23, 1906.*]

[ACTS OF 1906, CHAPTER 316.]

AN ACT TO AUTHORIZE THE RECEPTION OF VOLUNTARY PATIENTS AT THE
FOXBOROUGH STATE HOSPITAL.

Be it enacted, etc., as follows:

SECTION 1. Any male person who is a dipsomaniac or inebriate and who is desirous of submitting himself to treatment in the Foxborough state hospital and makes written application therefor, may be received by the trustees of said hospital and detained therein as a boarder and patient. Such person, however, after giving notice in writing of his intention or desire to leave the institution shall not be detained for more than three days.

SECTION 2. This act shall take effect upon its passage. [*Approved April 25, 1906.*]

[ACTS OF 1906, CHAPTER 352.]

AN ACT RELATIVE TO THE CLASS OF EPILEPTICS ELIGIBLE FOR ADMISSION
TO THE MASSACHUSETTS HOSPITAL FOR EPILEPTICS.

Be it enacted, etc., as follows:

SECTION 1. Section sixty-six of chapter eighty-seven of the Revised Laws is hereby amended by striking out the words "an idiot", in the second line, so as to read as follows: — *Section 66.* A person of the age

of fourteen years or over who is subject to epilepsy, if he is not a criminal, inebriate or violently insane, may be received for care and treatment in the Massachusetts hospital for epileptics by the trustees thereof or may, if insane, be committed thereto. The state board of insanity may also transfer to said hospital any such epileptic who has been committed to an insane hospital, or if it has reason to believe that he is deprived of proper care and treatment, may cause any such epileptic confined in an almshouse or other place at the public charge or otherwise to be transferred or committed thereto.

SECTION 2. This act shall take effect upon its passage. [*Approved May 3, 1906.*]

[ACTS OF 1906, CHAPTER 442.]

AN ACT RELATIVE TO THE ACCEPTANCE BY THE TOWN OF DANVERS OF AN ACT TO PROVIDE FOR SUPPLYING WATER TO THE DANVERS INSANE HOSPITAL, AND DEFINING THE WORDS "ACCRUED INTEREST" USED IN THAT ACT.

Be it enacted, etc., as follows:

SECTION 1. The accrued interest provided for in section six of chapter four hundred and sixty-nine of the acts of the year nineteen hundred and five, relating to a supply of water to the Danvers insane hospital by the town of Danvers, shall be computed from the first day of December in the years nineteen hundred, nineteen hundred and one, nineteen hundred and two, nineteen hundred and three, nineteen hundred and four, to the twenty-sixth day of May in the year nineteen hundred and five, upon the principal amounts due for the water supplied during the year, or part thereof, immediately preceding the said dates respectively, and without compounding any part thereof.

SECTION 2. The action taken by the town of Danvers at the town meeting held on the seventh day of June in the year nineteen hundred and five, purporting to accept the provisions of the said chapter four hundred and sixty-nine, shall be a sufficient acceptance of the said provisions for all purposes and as of that date: *provided*, that the definition of "accrued interest", as made in the preceding section, shall be accepted by the town as hereinafter provided.

SECTION 3. This act shall be submitted to the town at a town meeting to be held within two months after its passage, and shall take full effect upon the acceptance by the town at such meeting of the definition of the term "accrued interest", set forth in section one. [*Approved May 31, 1906.*]

SPECIAL APPROPRIATIONS.

	1906.	Eight Years, ending 1906.
<i>Worcester Hospital.</i>		
Constructing and furnishing a building of stone and brick to accommodate 80 male nurses,	\$55,000 00	\$235,498 44
[Acts, chapter 500, section 2.]		
<i>Taunton Hospital.</i>		
Completing the electric-lighting and cold-storage plants, . .	\$6,600 00	
Addition to the steam-heating plant and for general repairs,	5,400 00	
Painting,	3,000 00	
[Resolves, chapter 79.]	\$15,000 00	\$322,805 00
<i>Northampton Hospital.</i>		
Installation of a better water supply,	\$17,500 00	
Constructing a fire-proof brick building for painters' supplies and workshop,	2,500 00	
[Acts, chapter 500, section 2.]	\$20,000 00	\$208,300 00
<i>Danvers Hospital,</i>		\$324,050 00
<i>Westborough Hospital.</i>		
Constructing and furnishing buildings for tuberculous patients,	\$5,000 00	
Obtaining and installing a new water supply,	35,000 00	
[Acts, chapter 500, section 2.]	\$40,000 00	\$378,050 00
<i>Worcester Asylum.</i>		
Renewal of and alterations in the plumbing of the women's wards,	\$9,500 00	
Construction of a cattle shed and hay barn at Grafton, . .	5,000 00	
Purchase of cattle at Grafton,	1,000 00	
Purchase of fruit trees at Grafton,	500 00	
[Resolves, chapter 94.]	\$16,000 00	\$444,500 00
<i>Medfield Asylum.</i>		
Constructing and furnishing a superintendent's house, . .	\$10,000 00	
Altering and repairing the old power house and its equipment for use as a bakery and storage for flour, and the construction of a subway therefrom to the kitchen building,	12,000 00	
[Acts, chapter 439, section 1.]	\$22,000 00	\$543,500 00
<i>State Colony.</i>		
Finishing and furnishing the attic of the administration building for the use of officers,	\$4,750 00	
Purchase of fire apparatus,	1,500 00	
Alteration and repair of three buildings to adapt them for the use of patients and employees,	8,000 00	
[Resolves, chapter 75.]	\$14,250 00	\$467,450 00
<i>State Hospital,</i>		\$120,000 00
<i>Asylum for Insane Criminals.</i>		
Two-story brick building for the employment of patients in laundry and other work,	\$20,000 00	\$220,000 00
[Acts, chapter 500, section 2.]		
<i>Hospital for Epileptics.</i>		
Constructing, furnishing and equipping a building to accommodate 100 women,	\$80,000 00	
[Acts, chapter 485, section 1.]		
Purchase of a stone crusher,	2,000 00	
[Resolves, chapter 89.]	\$82,000 00	\$408,300 00

SPECIAL APPROPRIATIONS—*Concluded.*

	1906.	Eight Years, ending 1906.
<i>School for the Feeble-minded.</i>		
Constructing and furnishing two brick buildings for nurses,	\$30,000 00	
Constructing and furnishing two buildings for patients, .	30,000 00	
Constructing and furnishing two wooden houses for male employees, [Acts, chapter 500, section 2.]	5,000 00	
Building an addition to the farmhouse dining room, . .	2,000 00	
Purchase of laundry machinery,	1,800 00	
Constructing barns, hay sheds and silos at Templeton Colony, [Resolves, chapter 84.]	6,200 00	
	\$75,000 00	\$487,500 00
<i>New School for the Feeble-minded,</i>	\$50,000 00	\$50,000 00
[Acts, chapter 510, section 2.]		
<i>Foxborough State Hospital.</i>		
Construction and equipment of a laundry building, . . .	\$20,000 00	
Construction of a water plant, including a water tower, piping and wells, [Acts, chapter 500, section 2.]	10,000 00	
Furnishing the dormitory now in process of construction,	4,000 00	
Ventilating ducts in the furnished buildings now occupied, [Resolves, chapter 85.]	1,500 00	
	\$35,500 00	\$168,450 00

SUMMARY OF APPROPRIATIONS.

	1906.	Eight Years, ending 1906.
<i>Insane.</i>		
Constructing, furnishing and equipping buildings for patients and nurses,	\$108,000 00	\$2,089,150 00
Number of patients provided for, 95		2,857
Average per capita cost, \$557 89		\$589 45
Number of nurses provided for, 80		609
Average per capita cost, \$687 50		\$665 19
Patients and nurses provided for, 175		3,466
Average per capita cost, \$617 14		\$602 76
Land, buildings for officers and employees and for administrative purposes, in- cluding furnishing and equipment, im- provements and repairs,	169,750 00	1,513,653 44
Total,	\$277,750 00	\$3,602,803 44
<i>Feeble-minded.</i>		
Constructing, furnishing and equipping buildings for patients and nurses,	\$60,000 00	\$317,000 00
Number of patients provided for, 40		670
Average per capita cost, \$750 00		\$383 58
Number of nurses provided for, 42		82
Average per capita cost, \$714 28		\$731 71
Patients and nurses provided for, 82		752
Average per capita cost, \$731 70		\$421 54
Land, buildings for officers and employees and for administrative purposes, in- cluding furnishing and equipment, im- provements and repairs,	65,000 00	220,500 00
Total,	\$125,000 00	\$537,500 00

SUMMARY OF APPROPRIATIONS — *Concluded.*

	1906.	Eight Years, ending 1906.
<i>Epileptic.</i>		
Constructing, furnishing and equipping buildings for patients and nurses, . . .	\$40,000 00	\$152,550 00
Number of patients provided for, . . .	50	192
Average per capita cost, . . .	\$800 00	\$732 03
Number of nurses provided for, . . .	-	27
Average per capita cost, . . .	-	\$444 44
Patients and nurses provided for, . . .	-	219
Average per capita cost, . . .	-	\$696 57
Land, buildings for officers and employees and for administrative purposes, in- cluding furnishing and equipment, im- provements and repairs, . . .	1,000 00	51,600 00
Total, . . .	\$41,000 00	\$204,150 00
<i>Inebriate.</i>		
Land, buildings for officers and employees and for administrative purposes, in- cluding furnishing and equipment, im- provements and repairs, . . .	\$1,000 00	\$33,950 00
<i>All Classes.</i>		
Constructing, furnishing and equipping buildings for patients and nurses, . . .	\$208,000 00	\$2,558,700 00
Number of patients provided for, . . .	185	3,719
Average per capita cost, . . .	\$664 86	\$559 72
Number of nurses provided for, . . .	122	718
Average per capita cost, . . .	\$696 72	\$664 48
Patients and nurses provided for, . . .	307	4,437
Average per capita cost, . . .	\$677 52	\$576 67
Land, buildings for officers and employees and for administrative purposes, in- cluding furnishing and equipment, im- provements and repairs, . . .	236,750 00	1,819,703 44
Total, . . .	\$444,750 00	\$4,378,403 44
Average amount appropriated annually, . . .		\$547,300 43

OPINIONS OF THE ATTORNEY-GENERAL.

Relative to the payment of commitment expenses:—

COMMONWEALTH OF MASSACHUSETTS,
OFFICE OF THE ATTORNEY-GENERAL, Jan. 8, 1906.

OWEN COPP, M.D., *Secretary, State Board of Insanity.*

DEAR SIR:—In a communication dated December 1 you request my opinion upon the following question:—

Are the necessary expenses attending the commitment of an inmate of the State Hospital to the insane department of said hospital chargeable to the county of Middlesex in case said inmate is not an inhabitant of any county before his admission to said State Hospital, and, if not, what provision is made for the payment of such expenses of such commitment?

Revised Laws, chapter 87, section 49, as amended by Acts of 1905, chapter 475, section 1, provides as follows:—

All necessary expenses attending the apprehension, examination, trial or commitment of an alleged insane person shall, if the commitment is to a state insane hospital, county receptacle or the Boston insane hospital, be allowed and certified by the judge, and presented as often as once a year to the county commissioners, who shall examine and audit the same; and they shall then be paid by the county of which the alleged insane person is an inhabitant or, if an inmate of any public institution for the insane, feeble-minded, epileptic, dipsomaniac or inebriate, of the state hospital or the state farm, be committed to any such institution, such expenses shall be paid by the county of which such inmate was last an inhabitant before his admission to the institution. If application is made for commitment to any other asylum, hospital or receptacle, the expenses shall be paid by the applicant or by a person in his behalf.

This statute provides that the expense of commitment of a person who is an inmate of a State Hospital shall be paid by the county of which he was last an inhabitant before his admission to the State Hospital. It makes no provision for the payment of the expense of commitment of an inmate of such an institution who was never an inhabitant of a county within this Commonwealth. Such expense cannot be charged to the county of Middlesex on the ground that the alleged insane person was an inhabitant of that county while an inmate of the State Hospital, for the provision that the expense of commitment of an inmate of the State Hospital shall be paid by the county of which such inmate was last an inhabitant before his admission to the institution takes the case out of the general provision that the expense of commitment should be paid by the county of which the person committed was an inhabitant.

Apart from the statute quoted, there is no provision for the payment of expenses of commitment of insane persons to State institutions.

Very truly yours,

HERBERT PARKER,

Attorney-General.

Relative to the disposition of property belonging to deceased patients: —

COMMONWEALTH OF MASSACHUSETTS,
OFFICE OF THE ATTORNEY-GENERAL, July 16, 1906.

OWEN COPP, M.D., *Executive Officer, State Board of Insanity.*

DEAR SIR: — In reply to your letter of the 9th, in which you ask as to the proper course of action to take in disposing of the property belonging to a patient who has died in a State institution and has no known heirs, I would call your attention to section 37 of chapter 81 of the Revised Laws, which provides —

Upon the death of a pauper who at his decease is actually chargeable to a place within this commonwealth, the overseers of the poor thereof may take possession of all his real and personal property; and if administration is not

taken upon his estate within thirty days after his decease, they may in their own names sell and convey so much thereof as may be necessary to reimburse the expenses incurred for the pauper —

so that a city or town would be entitled, under the above circumstances, to the possession of the property if the person was a pauper. If the patient is not a pauper, the property should be turned over to a public administrator for the county within which the patient had a residence, if known to you; if that residence is not known, the property should be turned over to a public administrator for the county in which the hospital is located.

There is no requirement as to the length of time which should elapse before such action is taken, but I should say that a reasonable time would be thirty days after the death.

Very truly yours,

DANA MALONE,
Attorney-General.

Relative to the interpretation of the eight-hour law: —

COMMONWEALTH OF MASSACHUSETTS,
OFFICE OF THE ATTORNEY-GENERAL, July 26, 1906.

T. H. GAGE, Jr., Esq., *Trustee of the Worcester Insane Hospital.*

DEAR SIR: — In your letter dated July 25 you state that the trustees of the Worcester Lunatic Hospital desire my opinion in regard to certain aspects of the so-called eight-hour law, passed at the last session of the Legislature.

This act is chapter 517 of the Acts of 1906, and provides in its first section that: —

Eight hours shall constitute a day's work for all laborers, workmen and mechanics now or hereafter employed, by or on behalf of the Commonwealth, or of any county therein, or of any city or town which has accepted the provisions of section twenty of chapter one hundred and six of the Revised Laws; but in cases where a Saturday half-holiday is given the hours of labor upon the other working days of the week may be increased sufficiently to make a total of forty-eight hours for the week's work.

To your questions I reply as follows: —

(1) Does the eight-hour law carry with it a nine-hour wage?

It does not require a nine-hour wage.

(2) Can laborers, workmen and mechanics in State institutions work more than eight hours per day, and, if so, under what conditions?

In my opinion, laborers, workmen and mechanics working in State institutions may, if employed by State officials by the hour, work more than eight hours a day. St. 1906, chapter 517, section 1, is similar in terms to the federal act of July 25, 1868 (15 Stat. 77), Revised Stat-

utes, section 3738, which provides that "eight hours shall constitute a day's work for all laborers, workmen and mechanics who may be employed by or on behalf of the government of the United States."

In the case of *United States v. Martin*, 94 U. S. 400, the United States Supreme Court had this act under consideration, and, speaking by Mr. Justice Hunt, said: —

This was a direction by Congress to the officers and agents of the United States, establishing the principle to be observed in the labor of those engaged in its service. It prescribed the length of time which should amount to a day's work, when no special agreement was made upon the subject. There are several things which the act does not regulate, which it may be worth while to notice.

First, It does not establish the price to be paid for a day's work.

Second, The statute does not provide that the employer and the laborer may not agree with each other as to what time shall constitute a day's work.

We regard the statute chiefly as in the nature of a direction from a principal to his agent, that eight hours is deemed to be a proper length of time for a day's labor, and that his contracts shall be based upon that theory. . . .

It is to be noticed that since this decision an act has been passed (act of Aug. 1, 1892, chapter 352, 27 Stat. 340) relating to hours of labor of laborers and mechanics employed upon public works of the United States and of the District of Columbia, which expressly provides that it shall be unlawful to require or permit a laborer or mechanic to work more than eight hours in any calendar day.

The Massachusetts statute regulating the hours of labor has been construed by two of my predecessors. St. 1890, chapter 375, provided that: —

Nine hours shall constitute a day's work for all laborers, workmen and mechanics now employed or who may be employed by or on behalf of the Commonwealth of Massachusetts or any city or town therein; and all acts and parts of acts inconsistent with this act are hereby repealed.

On April 24, 1891, the Hon. Albert E. Pillsbury, then Attorney-General, advised the Governor that this statute did not prohibit the employment of labor in State institutions for more than nine hours a day, if such labor was contracted for and paid for by the hour.

By St. 1891, chapter 350, this act was amended so as to apply to counties. By St. 1893, chapter 406, it was provided: —

All contracts hereafter made by or on behalf of the Commonwealth requiring the employment of manual labor shall provide that persons employed in the performance of such labor under any such contract shall not

be required to work more than nine hours in each day, and that said nine hours shall constitute a day's work.

In St. 1894, chapter 508, sections 7 and 8, the provisions of St. 1890, chapter 375, as amended, and St., 1893, chapter 406, were substantially re-enacted. This act also provided a penalty for the violation of its provisions.

St. 1899, chapter 344, section 1, provided that eight hours should constitute a day's work for laborers, workmen and mechanics employed by a city or town; and section 3 of that chapter, amended by St. 1900, chapter 357, provided that this act should take effect only upon its acceptance by the city or town.

On May 14, 1900, the Hon. Hosea M. Knowlton, then Attorney-General, in an opinion, said:—

St. 1894, chapter 508, section 7, which provides that "Nine hours shall constitute a day's work for all laborers," etc., refers only to employment by the day. It does not and is not intended to prohibit the employment of labor by the hour, if the laborer is willing to be so employed.

If a laborer is told that he can only be employed upon his agreement to work more than nine hours per day at a given rate per hour, and accepts the employment upon such terms, such employment is an evasion of the law, but not, in my judgment, a violation of it. Being a penal law, it is to be construed strictly. A person so employed, however powerful the inducement, is, nevertheless, in contemplation of law, working voluntarily, and the case, so far as the statute is concerned, is the same as though no such threat were held out to him. Employment by the hour is not within the statute.

St. 1894, chapter 508, sections 7 and 8, and St. 1899, chapter 344, as amended, appear as Revised Laws, chapter 106, sections 19, 20 and 21, without substantial changes, and the same chapter contains a provision for penalty.

The present statute reduces the number of hours in a day's work for the Commonwealth or a county from nine to eight, with a provision that the number of hours may be increased if a Saturday half-holiday is given; otherwise, however, the law is not materially changed, and the statements quoted above from the opinions of my predecessor are, it seems to me, applicable to the law as it now stands, if the word "eight" be substituted for the word "nine."

(3) What application has the act to laborers, workmen and mechanics whose duties ordinarily call for Sunday work?

The statute provides for an eight-hour day on Sunday as well as on other days of the week for persons properly employed on that day as well as on other days of the week.

(4) In cases where the ordinary duties of laborers, workmen and mechanics require them to work seven days a week, does the law restrict

their employment to a total of forty-eight hours, or does fifty-six hours in such cases constitute a week's work?

The law does not restrict the employment of persons required to work seven days a week to a total of forty-eight hours.

(5) If a half-holiday is given, must it be a Saturday half-holiday?

Yes; if the half day is to be made up on other working days.

(6) If the appropriations for the maintenance of institutions are fixed for the year, shall we be warranted in overrunning the same to comply with the provisions of the eight-hour law?

No.

Very truly yours,

DANA MALONE,
Attorney-General.

THE STATE BOARD

deeply regrets Col. Chas. R. Codman's declination of a reappointment on the Board, of which he was one of the original members. The following resolution was adopted and spread upon the records:—

Whereas, Our colleague, Col. Charles R. Codman, has deemed it necessary, for private reasons, to decline a reappointment on the State Board of Insanity, of which he was one of the original members, therefore be it—

Resolved, That we spread upon our records the expression of our deep sense of individual loss and our high esteem of the eminent services which he has rendered to the Commonwealth.

His long and varied experience and unswerving fidelity to many public and private trusts made him a wise and trusted counsellor. His dignity of manner, breadth and fairness of mind and purity of motive always commanded confidence, while his kindness of heart and native courtesy endeared him to all his associates.

We extend to him these expressions of our regard and appreciation, with the hope for a long and happy continuance of good health and usefulness.

Twenty-four Board meetings were held during the official year.

Fifteen conferences with the trustees and superintendents of the different institutions were arranged, to promote harmonious action with relation to appropriations, construction and general policy.

Thirty-four visits of inspection to institutions were made by the Board, in addition to 159 by the executive officer, or his deputy or the financial agent of the Board.

Careful attention is paid to all complaints as to commitment, discharge or treatment of patients, whether originating with the latter or otherwise. Forty-three special investigations were made this year in regard to these and kindred matters relating to patients in institutions.

During the year a license to maintain a hospital for the care and treatment of insane persons has been granted by the Governor and Council, on the recommendation of the Board, to Arthur H. Ring, M.D., of Arlington.

In compliance with section 7, chapter 87 of the Revised Laws,

PLANS AND SPECIFICATIONS

have been examined and approved by the Board as follows:—

Worcester Hospital. — Sept. 12, 1906: Home for male nurses, provided for in chapter 500, Acts of 1906.

Danvers Hospital. — May 22, 1906: One-story wooden building, provided for in chapter 414, Acts of 1903.

Westborough Hospital. — Aug. 8, 1906: Building for tuberculous patients, provided for in chapter 500, Acts of 1906.

Aug. 16, 1906: A new water supply, provided for in chapter 500, Acts of 1906.

Worcester Asylum. — July 11, 1906: Renewal of and alterations in the plumbing of the women's wards, provided for in chapter 94, Resolves of 1906.

Sept. 12, 1906: Cow barn, provided for in chapter 94, Resolves of 1906.

Medfield Asylum. — Feb. 14, 1906: Three cottages for employees and a building for a cold-storage plant, provided for in chapter 104, Resolves of 1905.

State Colony. — March 14, 1906: Two buildings accommodating 50 patients each, and an administration building, provided for in chapter 444, Acts of 1905.

July 11, 1906: Finishing off the attic of the administration building, provided for in chapter 75, Resolves of 1906.

Hospital for Epileptics. — Aug. 8, 1906: Building for 100 patients, provided for in chapter 485, Acts of 1906.

Foxborough State Hospital. — Nov. 8, 1905: Building for 100 patients, and a central heating, lighting and power plant, provided for in chapter 444, Acts of 1905.

RECEIPTS AND EXPENDITURES BY THE BOARD, OCT. 1, 1905,
TO DEC. 1, 1906.

Receipts.

Reimbursement for board in institutions,	\$11,656 26
Worcester Hospital,	\$1,436 33
Taunton Hospital,	1,577 94
Northampton Hospital,	1,004 74
Danvers Hospital,	1,535 97
Westborough Hospital,	1,362 81
Worcester Asylum,	125 00
Medfield Asylum,	1,093 44
State Colony,	216 00
State Hospital,	161 90
Hospital for Epileptics,	26 43
Foxborough State Hospital,	73 89
Hospital Cottages for Children,	62 14
Boston Insane Hospital,	2,421 07
Family care,	424 64
Almshouses,	133 96
Repayment of expenses paid from appropriations,	32 60
Travelling and office expenses,	\$10 00
Transportation and medical examination,	22 60
Total receipts,	\$11,688 86

Expenditures.

Travelling and office expenses,	\$5,256 36
Travelling expenses:—	
Members of the Board,	\$454 67
Owen Copp,	\$175 56
Lowell F. Wentworth,	378 15
John E. Fish,	372 38
Francis B. Gardner,	164 02
Elmer R. Libby,	131 63
Benjamin F. Ward,	435 39
Randolph V. King,	354 18
Paul A. Green,	49 60
Mabel G. Gragg,	331 10
Alice C. Berce,	72 05
Ella Heal,	35 00
Alice Wheeler,	29 67
	<hr/> 2,528 73
Office expenses:—	
Express,	\$37 49
Miscellaneous,	66 11
Postage,	294 82
Amount carried forward,	<hr/> \$5,256 36

Amount brought forward, \$5,256 36

• Travelling and office expenses — *Concluded.*

Office expenses — *Concluded.*

Printing and binding,	\$713 02
Publications,	237 82
Stationery and office supplies,	714 30
Telegrams and telephone,	209 40
	<hr/> \$2,272 96

Salaries of officers and employees, 26,570 53

Owen Copp, M.D., secretary and executive officer, \$5,833 33

Lowell F. Wentworth, M.D., deputy executive officer, 3,437 50

Elmer R. Libby, financial agent, 900 00

Sarah Chapman, first clerk, 1,166 66

Rebecca J. Greene, accountant, 816 66

Nellie F. Ball, clerk, 875 00

Clara L. Fitch, stenographer, 741 66

Edith A. Stevens, clerk, 731 45

Eda W. Fitch, clerk, 333 33

Alice M. Hornsey, clerk, 150 00

John E. Fish, medical director, family care, 2,100 00

Mabel G. Gragg, visitor, family care, 933 33

Alice C. Berce, visitor, family care, 313 05

Alice Wheeler, visitor, family care, 178 76

Francis B. Gardner, support agent, 2,100 00

Benjamin F. Ward, visitor, support department, 1,400 00

Randolph V. King, visitor, support department, 957 59

Paul A. Green, clerk, support department, 700 00

Maude F. Freethy, clerk, support department, 802 22

Fred A. Hewey, transportation officer, 1,283 33

Ella Heal, transportation officer, 816 66

Transportation and medical examination, 10,347 14

Travelling expenses of officers: —

Fred A. Hewey, \$947 32

Ella Heal, 707 89

Mabel G. Gragg, 250 92

Alice C. Berce, 218 13

Alice Wheeler, 130 91

\$2,255 17

Travelling expenses, patients, 6,354 51

Assistance, 1,632 74

Express, 52 96

Miscellaneous, 40 22

Telegrams and telephone, 11 54

Amount carried forward, \$42,174 03

<i>Amount brought forward,</i>		\$42,174 03
Support of insane boarded out in families,		39,346 05
Board,	\$38,852 94	
Burial,	40 00	
Clothing,	181 46	
Express,	3 25	
Medical attendance,	250 50	
Special nursing,	15 00	
Telephone and telegrams,	1 15	
Miscellaneous,	1 75	

Other expenditures under control of the Board :—

Support of insane persons in the Boston Insane Hospital,	144,036 28
Support of State paupers in the Hospital Cottages for Children,	6,547 97
Printing annual report,	925 58
Reimbursement of small towns,	3,714 04
Total expenditures,	\$236,743 95

Under the provisions of chapter 184, Acts of 1906, it becomes necessary for the Board to review the annual estimates for maintenance expenses of the different institutions, and to express its opinion as to the necessity or expediency of granting appropriations according to them.

The intelligent discharge of this duty requires the Board to have accurate, comparative information as to their accounts and business methods. In consequence, a financial agent has been appointed, who is an expert accountant and gives his whole attention to such matters. He makes monthly visits to the institutions, and at present is giving special attention to the examination of vouchers, from which he gathers the data for preparing price cards according to the following form :—

INSTITUTION	QUOTED F. O. B. AT PURCHASE POINT					
	Total Cost	Total Units	AVERAGE PRICE		Maximum Price	Minimum Price
			Month	Year		
Worcester Hospital						
Taunton Hospital						
Northampton Hospital						
Danvers Hospital						
Westborough Hospital						
Worcester Asylum						
Medfield Asylum						
State Colony						
Hospital for Epileptics						
Foxborough Hospital						
School for the Feeble-minded						

These price cards are sent as soon as completed to each institution, and will be the basis on which the cost, prices, quantities and qualities of articles purchased at the different institutions will be summarized for the year, and tabulated in comparative form for publication in this report.

SUPPORT DEPARTMENT.

The work of the support department has been continued along the general lines laid down in previous reports, and steadily grows in importance and results.

Its agents have made during the year 90 visits to institutions, 1,373 visits to relatives and friends, and have made and recorded 2,096 patients' histories.

It has furnished information leading to the deportation of 172 aliens, — 43 by the United States Immigration Service, 129 by the State Board, compared with 45 and 123 respectively the previous year.

Seventy-four State charges were made private patients and 14 others are pending. Of 7 such cases pending at the beginning of the year, 2 became private patients, 1 reimbursing, 3 have been dropped from further consideration and 1 continued.

Since its establishment in January, 1904, 150 State charges have been made private patients, at \$5 and upwards per week.

There were on Oct. 1, 1905, 483 reimbursing patients, and 223 were added during the year, making a total of 706. Of these, 10 became private patients during the year, 38 ceased to make payment, 53 were discharged, 64 died; so that on Oct. 1, 1906, there were 541 reimbursing patients, — an increase of 58 for the year.

The daily average number of reimbursing patients was 458.76, — an increase of 19 over the previous year, and 4.6 per cent. of public charges in institutions.

The average rate of reimbursement was \$2.95 per week, compared with \$3.04 the previous year.

Reimbursements for the board of such patients, which was received by treasurers of institutions and this Board and paid to the State Treasurer prior to Dec. 1, 1906, amounted to \$87,804.66, distributed as follows: —

	Year ending Sept. 30, 1905.	Year ending Sept. 30, 1906.	Oct. 1, 1905, to Nov. 30, 1906.	Total Jan. 1, 1904, to Nov. 30, 1906.
Worcester Hospital, . . .	\$13,001 43	\$11,013 55	\$13,778 36	\$31,577 46
Taunton Hospital, . . .	9,363 97	10,056 88	12,456 39	25,915 71
Northampton Hospital, . .	9,065 00	7,937 88	10,205 87	23,590 02
Danvers Hospital, . . .	16,466 50	15,605 29	19,400 87	43,979 68
Westborough Hospital, . .	9,030 61	10,001 10	12,152 84	25,096 56
Boston Insane Hospital, . .	1,120 90	1,902 63	2,421 07	4,074 90
Worcester Asylum, . . .	4,701 28	4,602 45	5,471 51	12,165 79
Medfield Asylum, . . .	7,936 13	7,415 57	8,671 59	19,734 05
State Colony,	236 78	961 60	1,163 80	1,414 58
State Hospital,	242 94	161 90	161 90	455 24
Asylum for Insane Criminals, .	8 00	-	-	80 80
Hospital for Epileptics, . .	1,014 05	1,035 05	1,225 83	2,620 14
Foxborough State Hospital, .	-	-	73 89	73 89
Hospital Cottages, . . .	24 00	52 14	62 14	86 14
Family care,	298 44	251 64	424 64	723 08
Almshouses,	240 90	133 96	133 96	849 66
Totals,	\$72,750 93	\$71,131 64	\$87,804 66	\$192,437 70

DEPORTATIONS.

During the year 325 cases were under consideration for deportation, of which 262 were closed, leaving 63 cases pending at the close of the year, against 76 the previous year.

One hundred and seventy-two persons were deported, of whom none reappeared in institutions during the year. Details of these operations, compared with those of the previous year, are shown in the following table: —

	STATE BOARD.			UNITED STATES IMMIGRATION SERVICE.			TOTALS.			TOTALS.		
	Men.	Women.	Totals.	Men.	Women.	Totals.	Men.	Women.	Totals.	1905.	1906.	Increase.
Cases pending Oct. 1, 1905,	41	29	70	1	5	6	42	34	76	41	76	35
Since reported,	115	63	178	27	35	62	142	98	240	263	240	33*
Received from Immigration Service,	4	5	9	-	-	-	4	5	9	-	9	9
Total cases under investigation,	160	97	257	28	40	68	188	137	325	304	325	21
Deported,	90	39	129	15	28	43	105	67	172	108	172	4
Viz.: To other States,	36	14	50	-	-	-	36	14	50	60	50	10*
To other countries,	54	25	79	15	28	43	69	53	122	108	122	14
Discharged,	11	11	22	2	1	3	13	12	25	27	25	2*
Viz.: To care of friends,	11	11	22	2	1	3	13	12	25	23	25	2
From escape,	-	-	-	-	-	-	-	-	-	4	-	4*
Died,	7	-	7	2	1	3	9	1	10	7	10	3
Withdrawn,	1	-	1	1	-	-	1	-	1	3	1	2*
Viz.: Returned to penal institutions,	1	-	1	-	-	-	1	-	1	1	1	-
Became United States cases,	-	-	-	-	-	-	-	-	-	2	-	2*
Rejected,	2	2	4	4	5	9	4	5	9	7	9	2
Became private patients,	-	-	-	-	1	1	2	3	5	6	5	1*
Became reimbursing patients,	-	-	-	-	-	-	-	-	-	1	1	1*
Dropped from further consideration,	23	17	40	-	-	-	23	17	40	9	40	31
Viz.: As not practicable to deport,	15	12	27	-	-	-	15	12	27	3	27	24
As having no place to go,	8	5	13	-	-	-	8	5	13	6	13	7
Total cases closed,	134	69	203	23	36	59	157	105	262	228	262	34
Cases pending Oct. 1, 1906,	26	28	54	5	4	9	31	32	63	76	63	13*
Viz.: On visit,	1	-	1	-	-	-	1	-	1	2	1	1*
Under sentence,	2	1	3	-	-	-	2	1	3	6	3	3*
Escaped,	-	-	-	-	-	-	-	-	-	3	-	3*
Not fit to leave institutions,	12	15	27	1	3	4	13	18	31	39	31	8*
Under investigation,	11	12	23	4	1	5	15	13	28	26	28	2

* Decrease.

THE ALLEGED INSANE, FEEBLE-MINDED AND EPILEPTIC IN
ALMSHOUSES AND IN THE COMMUNITY.

The tentative arrangement has been continued with the State Board of Charity relative to the visitation of alleged insane, feeble-minded or epileptic persons who may be cared for in almshouses or private families under public support. Eleven such cases were reported during the year by the Board of Charity, and investigated by a medical officer of the Board of Insanity. Three commitments as insane were advised and made, inclusive of one case reported the previous year but committed this year. One epileptic girl was admitted to the Hospital Cottages for Children; one imbecile child was accepted for visitation by the Board of Insanity. No action was deemed necessary in the other cases.

Ten visits to almshouses and private families for special investigation were made by a medical officer of the Board.

Respectfully submitted,

GEORGE F. JELLY,
JAMES B. AYER,
SEWARD W. JONES,
MICHAEL J. O'MEARA,
HENRY P. FIELD.

State Board of Insanity.

APPENDIX.

FINANCIAL STATISTICS.

VALUATION OF STATE INSTITUTIONS.

TABLE I. — *Valuation of State Institutions, Nov. 30, 1906.*

INSTITUTIONS.	REAL ESTATE.				PERSONAL ESTATE.		Total Valuation, — Real and Personal.	Total Increase for the Year.	
	Number of Acres of Land.	Value of Land.	Value of Buildings.	Total Valuation.	Increase for the Year.	Valuation.			
Insane hospitals : —									
Worcester,	411.54	\$155,300 00	\$1,337,648 00	\$1,492,948 00	\$2,460 00 ¹	\$225,331 86	\$11,231 07	\$1,718,279 86	\$8,771 07
Taunton,	330.00	52,100 00	576,900 00	629,000 00	43,800 00	150,917 01	2,855 17 ¹	779,917 01	40,944 83
Northampton,	511.00	56,900 00	666,750 00	723,650 00	—	118,811 63	13,339 51	842,461 63	13,339 51
Danvers,	497.00	44,900 00	1,574,444 32	1,619,344 32	21,746 46	244,118 86	6,043 34	1,863,463 18	27,789 80
Westborough,	543.00	43,030 00	669,075 00	712,125 00	8,200 00	138,376 85	5,014 74 ¹	850,501 85	3,185 26
Totals,	2,292.54	\$352,250 00	\$4,824,817 32	\$5,177,067 32	\$71,286 46	\$877,556 21	\$22,744 01	\$6,064,623 53	\$94,030 47
Insane asylums : —									
Worcester,	749.39	\$214,880 00	\$548,500 00	\$763,380 00	\$79,531 00	\$102,156 14	\$4,942 30	\$865,536 14	\$84,473 30
Medfield,	471.00	27,250 00	1,426,046 25	1,453,296 25	53,425 12	237,005 79	21,627 08	1,690,302 64	75,052 20
State Colony,	1,581.51	45,866 00	347,541 44	393,407 44	80,131 44	46,182 88	12,880 26	439,590 32	93,011 70
Totals,	2,801.90	\$287,996 60	\$2,322,087 69	\$2,610,084 29	\$213,087 56	\$385,344 81	\$39,449 64	\$2,995,429 10	\$252,537 20
Hospitals and asylums,	5,094.44	\$640,246 60	\$7,146,905 01	\$7,787,151 61	\$284,374 02	\$1,262,901 02	\$62,193 65	\$9,050,052 63	\$346,567 67
Miscellaneous : —									
State Hospital, ²	699.00	\$58,315 00	\$892,765 00	\$951,080 00	\$76,365 00	\$345,085 17	\$46,689 92	\$1,296,165 17	\$123,054 92
State Farm, ²	1,150.00	62,072 50	816,400 00	878,472 50	6,015 00	282,312 53	15,886 65	1,160,785 03	21,901 65
Hospital for Epileptics,	658.00	31,613 00	429,985 00	461,598 00	88,999 60	155,527 84	13,961 81	617,125 84	102,961 41
Foxborough State Hospital,	106.00	16,500 00	275,200 00	291,700 00	100,000 00	42,603 71	42 29	334,303 71	100,042 29
School for the Feeble-minded,	1,818.00	69,000 00	611,415 53	680,415 53	71,565 06	131,200 17	27,363 15	811,615 70	98,928 21
Totals,	4,431.00	\$237,500 50	\$3,025,765 53	\$3,263,266 03	\$342,944 66	\$956,729 42	\$103,943 82	\$4,219,995 45	\$446,888 48
Aggregates,	9,525.44	\$877,747 10	\$10,172,670 54	\$11,050,417 64	\$627,318 68	\$2,219,630 44	\$166,137 47	\$13,270,048 08	\$793,456 15

¹ Decrease.² Includes all departments.

VALUATION OF STATE INSTITUTIONS.

TABLE II. — *Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1906.*

INSTITUTIONS.	PROVISIONS AND GROCERIES.		CLOTHING AND CLOTHING MATERIAL.		FURNISHINGS.		FUEL.		MISCELLANEOUS.		TOTALS.	
	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.
Insane hospitals :—												
Worcester, . . .	\$10,310 56	\$3,007 75	\$3,325 51	\$540 45	\$95,755 46	\$1,123 13	\$6,136 00	\$786 50 ¹	—	—	\$6,136 00	\$786 50 ¹
Taunton, . . .	3,341 07	325 58	5,284 05	4,586 86 ¹	64,705 18	51 49	1,820 00	2,180 00 ¹	—	—	1,820 00	2,180 00 ¹
Norfolk, . . .	9,979 61	685 68 ¹	1,712 06	266 03 ¹	43,154 80	1,200 91	8,853 00	3,214 50	—	—	8,853 00	3,214 50
Danvers, . . .	6,415 91	1,101 23	3,209 12	371 67	79,966 93	1,286 21 ¹	12,619 45	5,447 15	—	—	12,619 45	5,447 15
Westborough, . . .	4,016 42	2,022 70 ¹	1,756 24	600 49	54,856 77	1,057 27 ¹	841 65	439 15	—	—	841 65	439 15
Totals, . . .	\$34,063 57	\$1,726 18	\$15,297 58	\$3,340 88 ¹	\$338,529 14	\$32 05	\$30,270 10	\$6,134 30	—	—	\$30,270 10	\$6,134 30
Insane asylums :—												
Worcester, . . .	\$2,097 23	\$737 30	\$2,859 61	\$366 42	\$31,930 79	\$2,375 63	\$2,000 00	\$4,139 00 ¹	—	—	\$2,000 00	\$4,139 00 ¹
Medfield, . . .	4,373 48	1,442 33	12,806 06	2,347 54	90,771 46	1,397 75	9,012 00	8,021 75	—	—	9,012 00	8,021 75
State Colony, . . .	1,864 52	382 68	1,021 10	928 87	19,934 01	5,358 19	1,919 27	280 94 ¹	\$345 28	\$99 36	2,264 55	181 58 ¹
Totals, . . .	\$8,335 23	\$3,162 31	\$16,685 77	\$3,642 83	\$142,696 26	\$9,131 57	\$12,931 27	\$3,601 81	\$345 28	\$99 36	\$13,276 55	\$3,701 17
Hospitals and asylums . . .	\$42,398 80	\$4,888 49	\$31,984 35	\$301 95	\$481,225 40	\$9,163 62	\$43,201 37	\$9,736 11	\$345 28	\$99 36	\$43,546 65	\$9,835 47
Miscellaneous :—												
State Hospital, ² . . .	\$6,680 42	\$1,850 99	\$13,728 52	\$2,793 92	\$133,931 05	\$22,787 57	\$22,225 00	\$4,960 00	—	—	\$22,225 00	\$4,960 00
State Farm, ² . . .	4,119 24	4,893 31 ¹	40,478 72	3,227 56	75,711 53	5,255 94	9,235 00	3,587 50	—	—	9,235 00	3,587 50
Hospital for Epileptics, . . .	1,514 80	468 24 ¹	4,926 76	1,642 43	55,484 48	7,069 50	15,731 43	4,564 56	\$163 40	\$235 50 ¹	15,894 83	4,329 06
Foxborough State Hospital, . . .	823 38	198 25	1,819 15	340 20	16,802 72	1,152 75	3,690 00	1,204 50 ¹	536 21	57 40	4,226 21	1,147 10 ¹
School for the Feeble-minded, . . .	1,744 54	770 25	6,637 36	2,923 36	59,790 13	12,007 75	10,009 00	2,565 39	—	—	10,009 00	2,565 39
Totals, . . .	\$14,882 38	\$2,542 06 ¹	\$67,590 51	\$10,927 47	\$341,719 91	\$48,203 51	\$60,890 43	\$14,472 95	\$699 61	\$178 10 ¹	\$61,590 04	\$14,294 85
Aggregates, . . .	\$57,281 18	\$2,346 43	\$99,574 86	\$11,229 42	\$822,945 31	\$57,427 13	\$104,091 80	\$24,209 06	\$1,044 89	\$78 74 ¹	\$105,136 69	\$24,130 32

² Includes all departments.¹ Decrease.

VALUATION OF STATE INSTITUTIONS.

TABLE II. — *Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1906* — Continued.

INSTITUTIONS.	REPAIRS AND IMPROVEMENTS.				TOTALS.				FARM, STABLE AND GROUNDS.			
	MACHINERY AND MECHANICAL FIXTURES.		MISCELLANEOUS.		Amount.	Increase.	Amount.	Increase.	LIVE STOCK.		PRODUCE.	
	Amount.	Increase.	Amount.	Increase.					Amount.	Increase.	Amount.	Increase.
Insane hospitals : —												
Worcester,	\$55,910 81	\$1,604 19	\$1,500 00	\$50 00 ¹	\$57,410 81	\$1,554 19	\$19,347 00	\$4,107 00	\$9,209 62	\$1,061 08 ¹		
Taunton,	45,985 00	8,985 00	—	—	45,985 00	8,985 00	10,318 50	3,950 30 ¹	4,586 25	1,381 00 ¹		
Northampton,	21,750 00	4,000 00	—	—	21,750 00	4,000 00	13,987 50	1,885 50	13,252 06	2,950 16		
Danvers,	91,192 04	3,555 32 ¹	—	—	91,192 04	3,555 32 ¹	13,865 00	1,252 25 ¹	13,856 35	1,387 85		
Westborough,	44,101 55	437 40	1,862 35	423 66 ¹	45,963 90	13 74	10,826 75	1,471 25 ¹	7,311 00	3,708 17 ¹		
Totals,	\$258,939 40	\$11,171 27	\$3,362 35	\$473 66 ¹	\$262,301 75	\$10,697 61	\$68,344 75	\$681 30 ¹	\$48,215 28	\$1,812 24 ¹		
Insane asylums : —												
Worcester,	\$44,000 00	\$4,000 00	—	—	\$44,000 00	\$4,000 00	\$9,000 00	\$2,100 58	\$3,552 19	\$1,050 48 ¹		
Medfield,	85,477 60	—	\$1,250 13	\$602 60	86,727 73	602 60	21,730 00	6,409 00	5,141 25	2,490 00		
State Colony,	3,680 97	1,053 22	1,436 33	246 01	5,117 30	1,299 23	5,863 50	139 00	3,562 29	872 39		
Totals,	\$133,158 57	\$5,053 22	\$2,686 46	\$848 61	\$135,845 03	\$5,901 83	\$36,593 50	\$8,648 58	\$12,255 73	\$2,311 91		
Hospitals and asylums,	\$392,097 97	\$16,224 49	\$6,048 81	\$374 95	\$398,146 78	\$16,599 44	\$104,938 25	\$7,967 28	\$60,471 01	\$499 67		
Miscellaneous : —												
State Hospital, ²	\$128,438 75	\$14,359 81	—	—	\$128,438 75	\$14,359 81	\$16,612 50	\$3 25 ¹	\$8,725 07	\$847 78 ¹		
State Farm, ²	92,030 00	3,475 00	—	—	92,030 00	3,475 00	18,876 25	1,597 00	23,439 75	1,445 30		
Hospital for Epileptics,	45,111 91	573 99	\$833 38	\$318 92 ¹	45,945 29	255 07	9,938 50	125 20 ¹	6,394 20	766 00 ¹		
Foxborough State Hospital,	1,387 70	226 18	430 08	59 87	1,817 78	286 05	4,589 50	50 50 ¹	1,909 45	175 20 ¹		
School for the Feeble-minded,	23,764 60	3,132 00	1,603 71	103 71	25,368 31	3,235 71	10,487 75	1,335 25	6,145 20	1,012 82		
Totals,	\$290,792 96	\$21,766 98	\$2,867 17	\$155 34 ¹	\$293,600 13	\$21,611 64	\$60,504 50	\$2,753 30	\$46,613 67	\$669 14		
Aggregates,	\$682,830 93	\$37,991 47	\$8,915 98	\$219 61	\$691,746 91	\$38,211 08	\$165,442 75	\$10,720 58	\$107,084 68	\$1,168 81		

¹ Decrease.² Includes all departments.

VALUATION OF STATE INSTITUTIONS.

TABLE II. — *Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1906* — Continued.

INSTITUTIONS.							FARM, STABLE AND GROUNDS — Con.			
CARRIAGES AND AGRICULTURAL IMPLEMENTS.				MISCELLANEOUS.			TOTALS.			
Amount.		Increase.		Amount.	Increase.		Amount.	Increase.		
Insane hospitals : —										
Worcester,	.	\$8,890 40	\$2,681 60	\$1,569 55	\$173 75	\$39,016 57	\$5,901 27			
Taunton,	.	8,391 70	409 24 ¹	601 95	26 95	23,898 40	5,713 59 ¹			
Northampton,	.	4,117 00	917 00	—	—	31,356 56	5,752 66			
Danvers,	.	8,176 55	1,792 50	2,868 87	408 05	38,766 77	2,336 15			
Westborough,	.	4,719 93	167 38	1,984 26	216 83 ¹	24,841 94	5,228 89 ¹			
Totals,	.	\$34,295 58	\$5,149 24	\$7,024 63	\$391 90	\$157,880 24	\$3,047 60			
Insane asylums : —										
Worcester,	.	\$3,882 94	—	—	—	\$10,435 13	\$1,050 10			
Medfield,	.	4,262 00	\$287 00	—	\$1,390 38 ¹	31,133 25	7,795 62			
State Colony,	.	2,495 50	186 15	\$1,150 65	750 65	13,071 94	1,948 19			
Totals,	.	\$10,640 44	\$473 15	\$1,150 65	\$639 73 ¹	\$60,640 32	\$10,793 91			
Hospitals and asylums,				\$44,936 02	\$5,622 39	\$218,520 56	\$13,841 51			
Miscellaneous : —										
State Hospital, ²	.	\$8,982 45	\$848 99	—	—	\$34,320 02	\$2 04 ¹			
State Farm, ²	.	16,696 93	1,860 93	—	—	59,012 93	4,903 23			
Hospital for Epileptics,	.	4,450 00	194 03	—	—	20,782 70	687 17 ¹			
Foxborough State Hospital,	.	3,605 94	222 18 ¹	\$452 17	\$144 00 ¹	10,557 06	591 94 ¹			
School for the Feeble-minded,	.	6,653 45	1,314 99	85 00	215 00 ¹	23,371 40	3,448 06			
Totals,	.	\$40,388 77	\$3,996 76	\$537 17	\$359 00 ¹	\$148,044 11	\$7,060 14			
Aggregates,	.	\$85,324 79	\$9,619 15	\$8,712 45	\$606 89 ¹	\$366,564 67	\$20,901 65			

¹ Decrease.² Includes all departments.

VALUATION OF STATE INSTITUTIONS.

TABLE II. — *Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1906 — Concluded.*

INSTITUTIONS.	MISCELLANEOUS.		TOTAL VALUATION OF PERSONAL PROPERTY.		PRIVATE FUNDS.	
	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.
Insane hospitals : —						
Worcester,	\$13,366 95	\$109 22 ¹	\$225,331 86	\$11,231 07	\$8,478 39	\$16 08
Taunton,	5,793 31	263 21	150,917 01	2,855 17 ¹	—	—
Northampton,	2,005 00	123 75	118,811 63	13,339 51	—	—
Danvers,	11,948 64	1,928 67	244,118 86	6,043 34	—	—
Westborough,	6,099 93	2,240 74	138,376 85	5,014 74 ¹	—	—
Totals,	\$39,213 83	\$4,447 15	\$877,556 21	\$22,744 01	\$8,478 39	\$16 08
Insane asylums : —						
Worcester,	\$2,773 38	\$551 85	\$102,156 14	\$4,942 30	—	—
Medfield,	2,181 81	19 49	237,005 79	21,627 08	—	—
State Colony,	2,909 46	2,544 68	46,182 88	12,880 26	—	—
Totals,	\$7,864 65	\$3,116 02	\$385,344 81	\$39,449 64	—	—
Hospitals and asylums,	\$47,078 48	\$7,563 17	\$1,262,901 02	\$62,193 65	\$8,478 39	\$16 08
Miscellaneous : —						
State Hospital, ²	\$8,761 41	\$60 33 ¹	\$345,085 17	\$46,089 92	—	—
State Farm, ²	1,725 11	330 73	282,312 53	13,886 65	—	—
Hospital for Epileptics,	10,978 98	1,841 16	155,527 84	13,961 81	—	—
Foxborough State Hospital,	6,557 41	155 92 ¹	42,603 71	42 29	—	—
School for the Feeble-minded,	4,279 43	2,412 63	131,200 17	27,363 15	\$76,049 40	\$10,080 49
Totals,	\$29,302 34	\$4,328 27	\$656,729 42	\$103,943 82	\$76,049 40	\$10,080 49
Aggregates,	\$76,380 82	\$11,891 44	\$2,219,630 44	\$166,137 47	\$84,527 79	\$10,096 57

¹ Decrease.² Includes all departments.

SPECIAL APPROPRIATIONS.

TABLE III. — *General Statement as to Special Appropriations.*

INSTITUTIONS.	Whole Amount.	EXPENDED OCT. 1, 1905, TO NOV. 30, 1906.							
		ADDING TO ORIGINAL VALUE OF PLANT.							
		New Building, Improvements and Additions to Old Buildings for —							Total.
		Land.	Patients.	Nurses.	Other Employees.	Heat, Light and Power.	Farm, Stable and Grounds.	Other General Administration.	
Insane hospitals: —									
Worcester,	\$95,500 00	—	—	\$11,746 05	—	\$27 45	\$2,436 71	\$5,619 04	\$20,162 58
Taunton,	203,165 00	—	—	4,198 70	—	22,444 38	3,579 88	13,401 31	43,924 27
Northampton,	104,300 00	—	\$3,234 60	—	—	—	—	—	3,234 60
Danvers,	159,000 00	—	24,354 83	—	—	—	—	—	24,354 83
Westborough,	185,000 00	—	2,803 19	2,318 65	\$3,695 12	—	—	—	6,032 73
Totals,	\$746,905 00	—	\$30,392 02	\$18,263 40	\$3,695 12	\$22,471 83	\$6,316 59	\$19,020 35	\$106,545 97
Insane asylums: —									
Worcester,	\$422,500 00	—	\$82,896 84	—	—	\$545 91	\$1,592 31	\$6,996 20	\$94,381 22
Medfield,	336,049 72	\$21 27	32,265 61	\$13,760 87	\$6,193 81	2,913 76	1,628 32	17,610 46	\$74,372 83
State Colony,	440,900 00	—	61,321 91	—	—	—	2,779 40	2,002 55	69,362 25
Totals,	\$1,199,449 72	\$21 27	\$176,484 36	\$13,760 87	\$6,193 81	\$3,459 67	\$6,000 03	\$27,209 21	\$238,056 30
Hospitals and asylums,	\$1,946,354 72	\$21 27	\$208,876 98	\$32,024 27	\$9,888 93	\$25,931 50	\$12,316 62	\$46,229 56	\$344,002 27
Miscellaneous: —									
State Hospital (insane),	\$60,000 00	—	\$14,147 15	—	—	—	—	—	\$14,147 15
State Farm (insane),	120,000 00	—	3,674 53	—	—	—	—	\$4,775 80	8,450 33
Hospital for Epileptics,	171,640 00	—	78,895 60	—	—	\$173 24	—	565 02	77,683 86
Foxborough State Hospital,	133,500 00	—	78,867 42	—	—	—	—	—	78,867 42
School for the Feeble-minded,	441,200 00	—	62,742 32	\$517 87	\$1,201 58	\$87 90	\$10,019 83	4,400 00	79,779 50
Totals,	\$928,340 00	—	\$236,327 02	\$517 87	\$1,201 58	\$1,071 14	\$10,019 83	\$9,740 82	\$258,878 26
Aggregates,	\$2,874,694 72	\$21 27	\$443,204 00	\$32,542 14	\$11,090 51	\$27,002 64	\$22,336 45	\$55,970 38	\$603,480 53

SPECIAL APPROPRIATIONS.

TABLE III. — *General Statement as to Special Appropriations — Continued.*

	EXPENDED OCT. 1, 1905, TO NOV. 30, 1906 — Con.							
	ADDING TO ORIGINAL VALUE OF PLANT — Con.							
	First Furnishing and Equipping for —							
	Patients.	Nurses.	Other Employees.	Heat, Light and Power.	Farm, Stable and Grounds.	Other General Administration.	All Other Purposes.	Total.
INSTITUTIONS.								
Insane hospitals: —								
Worcester,	\$776 36	\$1,096 40	—	\$13,937 36	—	\$7,244 07	—	\$23,054 19
Taunton,	1,966 85	—	—	—	—	—	—	1,966 85
Northampton,	—	—	—	—	—	—	—	735 37
Danvers,	—	—	—	—	—	—	—	—
Westborough,	98 97	675 09	\$1,572 41	—	—	—	\$2,089 49	4,445 96
Totals,	\$2,832 18	\$1,771 49	\$1,572 41	\$13,937 36	—	\$7,979 44	\$2,089 49	\$30,192 37
Insane asylums: —								
Worcester,	\$1,441 50	—	—	\$4,253 00	\$1,736 72	\$1,628 41	\$464 86	\$9,524 49
Medfield,	388 69	—	\$1,503 27	—	—	—	—	1,891 96
State Colony,	2,551 28	—	6 00	7,999 99	67 63	512 38	203 47	11,340 75
Totals,	\$4,381 47	—	\$1,509 27	\$12,252 99	\$1,804 35	\$2,140 79	\$668 33	\$22,757 20
Hospitals and asylums,	\$7,213 65	\$1,771 49	\$3,081 68	\$26,190 35	\$1,804 35	\$10,120 23	\$2,767 82	\$52,949 57
Miscellaneous: —								
State Hospital (insane),	\$4,902 79	—	—	—	—	—	—	\$4,902 79
State Farm (insane),	—	—	—	—	—	—	—	—
Hospital for Epileptics,	4,117 07	—	—	—	\$345 80	—	—	4,462 87
Foxborough State Hospital,	—	—	—	—	—	—	—	—
School for the Feeble-minded,	5,748 28	—	—	—	—	\$1,800 00	—	7,548 28
Totals,	\$14,768 14	—	—	—	\$345 80	\$1,800 00	—	\$16,913 94
Aggregates,	\$21,981 79	\$1,771 49	\$3,081 68	\$26,190 35	\$2,150 15	\$11,920 23	\$2,767 82	\$69,863 51

TABLE III. — *General Statement as to Special Appropriations — Continued.*

					EXPENDED OCT. 1, 1905, TO NOV. 30, 1906 — Con.			
					ADDING TO ORIGINAL VALUE OF PLANT — Col.			
INSTITUTIONS.					Water Supply Ex- clusive of Plumbing in Buildings.	Sewerage Ex- clusive of Plumbing in Buildings.	Miscellaneous.	Total Expenditures Adding to Original Value of Plant.
Insane hospitals: —								
Worcester, . . . . .	.	.	.	.	—	—	—	\$20,162 58
Taunton, . . . . .	.	.	.	.	—	—	—	66,978 46
Northampton, . . . . .	.	.	.	.	—	—	—	5,191 45
Danvers, . . . . .	.	.	.	.	—	—	\$1,987 74	27,077 94
Westborough, . . . . .	.	.	.	.	—	—	—	34,478 63
Totals, . . . . .	.	.	.	.	\$15,162 98	—	\$1,987 74	\$153,889 06
Insane asylums: —								
Worcester, . . . . .	.	.	.	.	—	—	\$10,951 41	\$114,857 12
Medfield, . . . . .	.	.	.	.	—	\$7,520 08	644 24	84,450 08
State Colony, . . . . .	.	.	.	.	\$2,650 93	57 50	672 02	84,023 45
Totals, . . . . .	.	.	.	.	\$2,650 93	\$7,578 18	\$12,267 67	\$283,331 55
Hospitals and asylums, . . . . .	.	.	.	.	\$17,813 91	\$7,578 18	\$14,255 41	\$437,220 61
Miscellaneous: —								
State Hospital (insane), . . . . .	.	.	.	.	—	—	—	\$19,049 94
State Farm (insane), . . . . .	.	.	.	.	—	—	—	8,450 33
Hospital for Epileptics, . . . . .	.	.	.	.	—	—	—	82,006 73
Foxborough State Hospital, . . . . .	.	.	.	.	\$2,942 19	—	—	81,809 61
School for the feeble-minded, . . . . .	.	.	.	.	—	—	—	87,327 78
Totals, . . . . .	.	.	.	.	\$2,942 19	—	—	\$278,734 39
Aggregates, . . . . .	.	.	.	.	\$20,756 10	\$7,578 18	\$14,255 41	\$715,955 00

SPECIAL APPROPRIATIONS.

TABLE III. — *General Statement as to Special Appropriations — Continued.*

EXPENDED OCT. 1, 1905, TO NOV. 30, 1906 — Con.									
NOT ADDING TO ORIGINAL VALUE OF PLANT. — REPAIRS AND RENEWALS.									
INSTITUTIONS.	Buildings.	Furnishings and Equipment for —				Total Repairs and Renewals.	Total Expenditures.		
		Nurses.	Heat, Light and Power.	Farm, Stable and Grounds.	All Other Purposes.				
Insane hospitals: —									
Worcester,	\$2,088 85	—	—	—	—	\$2,088 85	\$20,162 58		
Taunton,	—	—	—	—	—	—	60,067 31		
Northampton,	—	\$3,999 99	—	—	—	3,999 99	9,191 44		
Danvers,	—	—	—	—	—	—	27,077 94		
Westborough,	—	—	—	—	—	—	34,478 63		
Totals,	\$2,088 85	\$3,999 99	—	—	—	\$6,088 84	\$159,977 90		
Insane asylums: —									
Worcester,	—	\$1,700 00	—	\$185 00	\$1,145 54	\$3,030 54	\$117,896 66		
Medfield,	\$163 92	\$675 00	—	—	—	838 92	85,289 90		
State Colony,	—	—	—	—	—	—	84,023 45		
Totals,	\$163 92	\$675 00	\$1,700 00	\$185 00	\$1,145 54	\$3,878 46	\$287,210 01		
Hospitals and asylums,	\$2,252 77	\$675 00	\$5,708 99	\$185 00	\$1,145 54	\$9,967 30	\$447,187 91		
Miscellaneous: —									
State Hospital (insane),	—	—	—	—	—	—	\$19,049 94		
State Farm (insane),	—	—	—	—	—	—	8,450 33		
Hospital for Epileptics,	—	—	—	—	—	—	82,096 73		
Foxborough State Hospital,	—	—	—	—	—	—	81,869 61		
School for the Feeble-minded,	—	—	—	—	—	—	87,327 78		
Totals,	—	—	—	—	—	—	\$278,734 39		
Aggregates,	\$2,252 77	\$675 00	\$5,708 99	\$185 00	\$1,145 54	\$9,967 30	\$725,922 30		

TABLE III. — *General Statement as to Special Appropriations — Concluded.*

INSTITUTIONS.					Total Expenditures to Date.	Balance Unexpended.	Reverted to State Treasury.	Balance Available.
Insane hospitals:—								
Worcester, . . . . .	.	.	.	.	\$46,241 09	\$49,258 91	\$633 54	\$48,625 37
Taunton, . . . . .	.	.	.	.	188,859 13	14,245 87	6,774 21	7,471 66
Northampton, . . . . .	.	.	.	.	80,735 76	23,564 24	—	23,564 24
Danvers, . . . . .	.	.	.	.	157,392 46	31,607 54	97	1,006 57
Westborough, . . . . .	.	.	.	.	161,163 26	23,836 74	—	23,836 74
Totals, . . . . .	.	.	.	.	\$634,391 70	\$112,513 30	\$7,408 72	\$105,104 58
Insane asylums:—								
Worcester, . . . . .	.	.	.	.	\$384,650 30	\$37,849 70	—	\$37,849 70
Medfield, . . . . .	.	.	.	.	310,413 03	25,636 69	—	25,636 69
State Colony, . . . . .	.	.	.	.	402,291 08	38,608 92	\$1,078 87	37,530 05
Totals, . . . . .	.	.	.	.	\$1,097,354 41	\$102,095 31	\$1,078 87	\$101,016 44
Hospitals and asylums,					\$1,731,746 11	\$214,608 61	\$8,487 59	\$206,121 02
Miscellaneous:—								
State Hospital (insane), . . . . .	.	.	.	.	\$59,991 94	\$8 06	—	\$8 06
State Farm (insane), . . . . .	.	.	.	.	104,775 21	15,224 79	—	15,224 79
Hospital for Epileptics, . . . . .	.	.	.	.	99,388 92	72,251 08	\$3 55	72,247 53
Foxborough State Hospital, . . . . .	.	.	.	.	81,809 61	53,690 39	—	53,690 39
School for the Feeble-minded, . . . . .	.	.	.	.	331,885 34	109,314 66	25 21	109,289 45
Totals, . . . . .	.	.	.	.	\$677,851 02	\$250,488 98	\$28 76	\$250,460 22
Aggregates,					\$2,409,597 13	\$465,097 59	\$8,516 35	\$456,581 24

RECEIPTS OF STATE INSTITUTIONS.

TABLE IV. — *Receipts of State Institutions, Oct. 1, 1905, to Nov. 30, 1906.*

INSTITUTIONS.	Balance in State Treasury Oct. 1, 1905.	Maintenance Appropriation 1906.	Deficiency Appropriation 1906.	RECEIPTS PAID TO STATE TREASURER.		
				Reimbursements.	From Cities and Towns.	From Individ- uals.
Insane hospitals:—						
Worcester,	\$59,765 49	\$238,786 05	\$18,990 52	\$14,512 27	\$645 80	\$62,934 98
Taunton,	29,812 66	201,318 53	31,990 55	12,335 68	515 82	25,629 43
Norhampton,	66,240 30	138,424 00	—	10,246 23	—	38,251 78
Danvers,	134,979 43 ¹	241,409 57	—	20,286 95	287 39	43,730 36
Westborough,	45,880 61 ²	185,490 98	—	12,248 60	724 74	55,917 60
Totals,	\$336,678 54	\$1,008,389 13	\$50,981 07	\$69,629 73	\$2,173 75	\$226,464 15
Insane asylums:—						
Worcester,	\$76,336 97	\$139,648 56	—	\$5,556 01	—	—
Medfield,	112,918 53	253,331 51	\$25,736 17	10,168 82	—	—
State Colony,	18,324 64 ³	59,200 00	—	1,163 80	—	—
Totals,	\$207,580 14	\$452,180 07	\$25,736 17	\$16,888 63	—	—
Hospitals and asylums,	\$544,258 68	\$1,400,569 20	\$76,717 24	\$86,518 36	\$2,173 75	\$226,464 15
Miscellaneous:—						
State Hospital, ⁴	—	\$279,284 79	—	—	—	—
State Farm, ⁴	—	258,491 73	—	—	—	—
Hospital for Epileptics,	\$29,940 15	125,335 00	\$3,448 89	\$1,283 44	\$36,943 14	\$10,086 20
Foxborough State Hospital,	6,803 84 ¹	62,927 33	—	1 00	23,525 59	1,953 05
School for the Feeble-minded,	13,848 69 ¹	184,761 39	6,378 24	—	45,894 98	26,792 94
Totals,	\$50,592 68	\$910,800 24	\$9,827 13	\$1,284 44	\$106,363 71	\$38,832 19
Aggregates,	\$594,851 36	\$2,371,369 44	\$86,544 37	\$87,802 80	\$108,537 46	\$265,296 34

¹ 1905 balance, less September, 1905, bills.² 1905 balance, less September, 1905, bills, plus \$788.30 receipts not previously credited.³ 1905 balance, less \$1,270.58, receipts not previously credited.⁴ Includes all departments.

RECEIPTS OF STATE INSTITUTIONS.

TABLE IV. — Receipts of State Institutions, Oct. 1, 1905, to Nov. 30, 1906 — Concluded.

INSTITUTIONS.	RECEIPTS PAID TO STATE TREASURER — Conl.				Total Foregoing.	Receipts reverting to State Treasurer Jan. 1, 1906.	Receipts 1906 not Available.	Total Maintenance Funds.
	Soldiers' Relief.	Income from Sales, etc.	Total Payments to State Treasurer.					
Insane hospitals:—								
Worcester,	—	\$11,661 22	\$89,754 27		\$407,296 33	—	\$65,048 59	\$341,647 74
Taunton,	—	4,907 74	43,388 67		306,510 41	—	33,163 26	273,347 15
Northampton,	—	7,531 75	56,199 21		290,863 51	\$19,887 11	42,790 85	198,185 55
Danvers,	—	4,314 17	68,618 87		448,007 92	53,198 20	53,269 91	341,539 81 ¹
Westborough,	—	2,582 19	71,473 13		302,804 72	6,318 09	55,317 32	241,169 31
Totals,	\$169 45	\$30,997 07	\$329,434 15		\$1,725,482 89	\$79,403 40	\$250,189 93	\$1,395,889 56
Insane asylums:—								
Worcester,	—	\$1,224 83	\$6,780 84		\$222,766 37	\$6,692 20	\$5,211 58	\$210,862 59
Medfield,	—	5,562 40	15,731 22		407,717 43	—	11,596 68	396,120 75
State Colony,	—	234 82	1,398 62		78,923 26	4,874 63 ²	1,114 31	72,934 32
Totals,	—	\$7,022 05	\$23,910 68		\$709,407 06	\$11,566 83	\$17,922 57	\$679,917 66
Hospitals and asylums,	\$169 45	\$38,019 12	\$553,344 83		\$2,434,889 95	\$90,970 23	\$268,112 50	\$2,075,807 22
Miscellaneous:—								
State Hospital, ³	—	\$924 17 ⁴	\$924 17		\$280,208 96	—	\$924 17	\$279,284 79
State Farm, ³	—	25,933 11 ⁴	25,933 11		284,424 84	—	25,933 11	258,491 73
Hospital for Epileptics,	\$212 17	2,273 04	56,797 99		203,522 63	—	41,471 41	168,050 62
Foxborough State Hospital,	—	4,294 42	28,774 06		99,565 23	—	21,413 74	78,091 49
School for the Feeble-minded,	—	1,926 91	74,614 83		279,603 15	—	45,143 90	234,459 25
Totals,	\$212 17	\$38,351 05	\$183,044 16		\$1,153,264 21	—	\$134,886 33	\$1,018,377 88
Aggregates,	\$381 62	\$73,370 77	\$535,388 99		\$3,588,154 16	\$90,970 23	\$402,998 83	\$3,094,185 10 ¹

¹ Does not include \$23,111.16 expended in accordance with chapter 442, Acts of 1906.² Includes \$2,290.65 balance of 1905 maintenance appropriation reverting to State treasury.³ Includes all departments.⁴ Not credited to institution.

EXPENDITURES OF STATE INSTITUTIONS.

TABLE V. — *Expenditures from Maintenance Funds of the State Institutions Oct. 1, 1905 to Nov. 30, 1906.*

INSTITUTIONS.	HEAT, LIGHT AND POWER.				
	Salaries, Wages and Labor on Pay Roll.	Food.	Clothing and Clothing Material.	Furnishings.	Total.
Insane hospitals:—					
Worcester,	\$118,768 32	\$91,212 48	\$15,244 14	\$11,327 52	\$28,592 57
Taunton,	96,074 77	67,025 89	9,476 99	8,327 64	26,368 13
Northampton,	68,287 92	46,715 91	5,590 49	5,732 89	16,739 42
Danvers,	111,509 69	65,172 91	13,741 70	16,169 84	25,294 49
Westborough,	89,879 64	56,936 90	8,290 58	12,747 44	12,958 62
Totals,	\$484,530 34	\$327,664 09	\$49,343 90	\$54,305 33	\$107,953 23
Insane asylums:—					
Worcester,	\$72,104 94	\$46,227 01	\$11,722 92	\$9,734 70	\$15,948 29
Medfield,	125,951 26	87,144 22	26,161 48	9,819 61	33,170 48
State Colony,	25,438 47	14,310 90	4,420 82	3,344 86	6,819 40
Totals,	\$223,494 67	\$147,682 13	\$42,305 22	\$22,899 17	\$55,938 17
Hospitals and asylums,	\$708,025 01	\$475,346 22	\$91,649 12	\$77,204 50	\$163,891 40
Miscellaneous:—					
State Hospital, ¹	\$99,241 83	\$66,672 81	\$18,641 51	\$12,352 66	\$34,309 63
State Farm, ¹	72,377 11	74,099 66	21,993 67	7,235 71	28,163 48
Hospital for Epileptics,	57,707 10	31,052 87	3,645 85	4,403 81	13,814 02
Foxborough State Hospital,	24,275 31	15,623 04	1,890 96	1,481 31	6,571 02
School for the Feeble-minded,	88,044 05	55,344 50	16,926 72	11,082 71	13,788 87
Totals,	\$311,645 40	\$242,792 88	\$63,098 71	\$36,556 20	\$96,045 02
Aggregates,	\$1,019,670 41	\$718,139 10	\$154,747 83	\$113,700 70	\$200,536 42
					\$5,240 33
					\$101,885 35
					\$281,124 26

¹ Includes all departments.

EXPENDITURES OF STATE INSTITUTIONS.

TABLE V. — *Expenditures from Maintenance Funds of the State Institutions, etc. — Continued.*

INSTITUTIONS.		Repairs and Improvements.	Farm, Stable and Grounds.	Freight, Expressage and Transportation.	Water.	Funeral Ex- penses, return- ing Escaped Patients, print- ing Annual Report.	Miscellaneous.	Total Expenditures for Maintenance.
Insane hospitals:—								
Worcester,	.	\$20,364 46	\$20,651 30	\$313 23	\$6,739 82	\$1,105 03	\$12,163 14	\$327,762 86
Taunton,	.	11,210 08	18,252 23	1,285 30	4,731 02	439 17	11,995 15	258,659 65
Northampton,	.	14,635 41	17,795 89	1,632 16	3,611 04	330 61	9,148 48	191,239 02
Danvers,	.	30,140 08	29,549 27	5,763 45	28,070 41 ¹	237 38	16,338 64	344,152 81
Westborough,	.	13,918 08	15,999 72	16,260 24	280 03	514 56	11,635 88	240,998 18
Totals,	.	\$80,269 91	\$102,248 41	\$25,254 38	\$44,435 32	\$2,716 75	\$61,281 29	\$1,362,812 56
Insane asylums:—								
Worcester,	.	\$13,833 71	\$9,997 40	\$1,330 02	\$2,391 44	\$277 27	\$10,063 57	\$194,467 18
Melfield,	.	17,741 43	28,226 24	15,554 60	—	706 01	11,486 55	357,019 63
State Colony,	.	5,488 25	5,116 77	603 52	—	264 22	3,319 10	69,901 05
Totals,	.	\$37,063 39	\$43,340 41	\$17,488 64	\$2,391 44	\$1,347 50	\$24,899 22	\$621,387 86
Hospitals and asylums,		\$127,333 30	\$145,588 82	\$42,743 02	\$46,826 76	\$4,064 25	\$86,180 51	\$1,984,200 42
Miscellaneous:—								
State Hospital, ²	.	\$23,849 43	\$15,838 41	\$14,656 88	—	\$931 52	\$21,980 33	\$279,284 79
State Farm, ²	.	11,275 95	17,242 30	3,925 03	—	700 90	18,423 53	258,491 73
Hospital for Epileptics,	.	9,463 15	9,993 30	1,142 02	\$947 82	618 85	9,284 97	142,542 58
Boxborough State Hospital,	.	5,235 06	5,968 28	997 94	1,250 00	1,236 29	7,638 31	72,476 81
School for the Feeble-minded,	.	17,489 12	15,671 23	2,870 64	1,879 85	239 01	10,752 91	234,746 06
Totals,	.	\$67,312 71	\$64,713 32	\$23,593 11	\$4,077 67	\$3,786 57	\$68,080 05	\$87,541 97
Aggregates,		\$194,646 01	\$210,302 14	\$66,336 13	\$50,904 43	\$7,850 82	\$154,260 56	\$2,971,742 39

¹ Includes \$23,111.16 expended in accordance with chapter 442, Acts of 1906.² Includes all departments.

EXPENDITURES OF STATE INSTITUTIONS.

TABLE V. — *Expenditures from Maintenance Funds of the State Institutions, etc. — Concluded.*

INSTITUTIONS.		Specialty Authorized Expenditures from Maintenance Funds.	Total Expenditures from Maintenance Funds.	Total Maintenance Funds.	Balance of Maintenance Funds in State Treasury Dec. 1, 1906. ¹	Balance of Specialty Authorized Expenditures from Maintenance Funds.	Balance on Maintenance Account reverts to State Treasury.
Insane hospitals:—							
Worcester,	.	\$8,416 53	\$336,179 39	\$341,647 74	\$5,480 45	\$5,371 42	\$109 03
Taunton,	.	—	258,659 65	273,347 15	14,087 50	—	14,087 50
Northampton,	.	3,999 99	195,239 01	198,185 55	2,946 54	2,944 72	1 82
Danvers,	.	16,305 88	300,548 73	304,650 97 ²	4,102 24	944 88	3,157 36
Westborough,	.	—	240,908 18	241,169 31	91 64	—	91 64
Totals,	.	\$28,812 40	\$1,391,624 96	\$1,419,000 72 ²	\$27,308 37	\$9,201 02	\$18,047 35
Insane asylums:—							
Worcester,	.	\$8,043 89	\$202,511 07	\$210,862 59	\$5,533 55	\$5,241 15	\$292 40
Medfield,	.	40,248 24	337,267 87	396,120 75	1,147 12 ³	1,829 49	2,976 61 ³
State Colony,	.	—	63,901 05	72,934 32	3,033 27	—	3,033 27
Totals,	.	\$48,292 13	\$609,679 99	\$679,917 66	\$7,419 70	\$7,070 64	\$349 06
Hospitals and asylums,							
	.	\$77,104 53	\$2,061,304 95	\$2,008,918 38 ²	\$34,728 07	\$16,331 66	\$18,396 41
Miscellaneous:—							
State Hospital, ³	.	—	\$279,284 79	\$279,284 79	—	—	—
State Farm, ³	.	—	258,491 73	258,491 73	—	—	—
Hospital for Epileptics,	.	\$738 26	143,280 84	168,069 62	\$24,573 36	—	\$24,573 36
Foxborough State Hospital,	.	—	75,909 11 ⁴	78,091 49	2,185 38	—	2,185 38
School for the Feeble-minded, ¹	.	—	234,746 06	234,559 25	220 42 ³	\$1,000 00	1,220 40 ³
Totals,	.	\$738 26	\$991,709 53 ⁴	\$1,018,377 88	\$28,538 32	\$1,000 00	\$26,538 32
Aggregates,							
	.	\$77,842 79	\$3,053,014 48	\$3,117,296 26 ²	\$63,266 39	\$17,331 66	\$44,934 73

¹ November bills paid; includes balance specially authorized.² Includes \$23,111.16 expended in accordance with chapter 442, Acts of 1903.³ Includes all departments.⁴ Includes industries, \$3,429.30.⁵ Deficiency.

RESOURCES AND LIABILITIES OF STATE INSTITUTIONS.

TABLE VI.—*Resources and Liabilities of State Institutions on Account of Maintenance, Dec. 1, 1906.*

INSTITUTIONS.	Resources— Balance of Maintenance Funds in State Treasury.	LIABILITIES.			Balance in Favor of the Institution.	Balance of Specially Authorized Expenditures.
		Due for November Bills.	Maintenance paid in Advance.	Total.		
Insane hospitals :—						
Worcester,	\$24,159 05	\$18,079 20	—	\$18,079 20	\$5,480 45	\$5,371 42
Taunton,	32,534 42	17,846 92	—	17,846 92	14,087 50	—
Northampton,	13,335 43	10,388 89	—	10,388 89	2,946 54	2,944 72
Danvers,	29,246 42	25,144 18	\$241 60	25,385 78	3,860 64	944 88
Westborough,	21,689 28	21,597 64	—	21,597 64	91 04	—
Totals,	\$120,965 20	\$93,656 83	\$241 60	\$93,898 23	\$27,066 77	\$9,261 02
Insane asylums :—						
Worcester,	\$18,930 38	\$13,396 83	—	\$13,396 83	\$5,533 55	\$5,241 15
Medfield,	23,215 57	26,192 18	\$200 82 ¹	26,393 00	3,177 43 ²	1,829 49
State Colony,	3,033 27	—	—	—	3,033 27	—
Totals,	\$45,179 22	\$39,589 01	\$200 82	\$39,789 83	\$5,389 39	\$7,070 64
Hospitals and asylums,	\$166,144 42	\$133,246 84	\$442 42	\$133,688 06	\$32,456 16	\$16,331 66
Miscellaneous :—						
State Hospital,	—	—	—	—	—	—
State Farm,	—	—	—	—	—	—
Hospital for Epileptics,	\$32,333 95	\$7,780 59	—	\$7,780 59	\$24,573 36	—
Foxborough State Hospital,	8,168 49	3,983 11	—	3,983 11	2,185 38	—
School for the Feeble-minded,	17,108 64	13,329 06	—	13,329 06	1,220 42 ²	\$1,000 00
Totals,	\$57,631 08	\$32,092 76	—	\$32,092 76	\$25,538 32	\$1,000 00
Aggregates,	\$223,775 50	\$165,329 60	\$442 42	\$165,780 82	\$57,994 48	\$17,331 66

¹ Bills due on account of specially authorized appropriations.² Deficiency.

WEEKLY PER CAPITA COST OF MAINTENANCE.

TABLE VII. — *Weekly Per Capita Cost of Maintenance in State Institutions for the Year ending Nov. 30, 1906.*

INSTITUTIONS.	PRIVATE PATIENTS.			PUBLIC CHARGES.				
	Average Number.	AVERAGE RATE OF BOARD.		Average Number.	NET PUBLIC EXPENSE. ¹			
		1906.	Five Years' Average.		WITH REPAIRS AND IMPROVEMENTS.		WITHOUT REPAIRS AND IMPROVEMENTS.	
					1906.	Three Years' Average.	1906.	Three Years' Average.
Insane hospitals : —								
Worcester,	154	\$6 29	\$5 91	997	\$3 68	\$3 61	\$3 10	\$3 03
Taunton,	82	4 81	4 60	862	3 85	4 09	3 61	3 81
Northampton,	108	5 45	5 40	660	3 15	3 10	2 64	2 70
Danvers,	123	5 83	5 71	1,166	3 55	3 26	2 94	2 79
Westborough,	153	5 99	6 29	756	3 69	3 58	3 31	3 17
Totals and averages,	620	\$5 78	\$5 68	4,441	\$3 60	\$3 55	\$3 13	\$2 09
Insane asylums : —								
Worcester,	—	—	—	764	\$3 78	\$3 55	\$3 20	\$3 06
Medfield,	—	—	—	1,519	3 46	3 04	3 13	2 77
State Colony,	—	—	—	334	3 36	—	3 03	—
Totals and averages,	—	—	—	2,617	\$3 54	\$3 19 ²	\$3 14	\$2 86 ²
Hospitals and asylums,	620	\$5 78	\$5 68	7,058	\$3 58	\$3 43 ²	\$3 13	\$3 01 ²
Miscellaneous : —								
State Hospital, ³	—	—	—	1,515	\$3 01	\$2 79	\$2 68	\$2 51
State Farm, ³	—	—	—	1,867	2 04	2 13	1 94	2 03
Hospital for Epileptics,	31	\$5 01	\$4 68	496	4 00	4 33	3 59	3 23
Foxborough State Hospital,	4	5 34	6 80	198	5 48	5 54	5 03	5 03
School for the Feeble-minded,	90	4 48	3 95	967	3 53	3 46	3 10	3 02

¹ Computed on C, less receipts from private patients and reimbursements.² Exclusive of State Colony.³ Includes all departments.

WEEKLY PER CAPITA COST OF MAINTENANCE.

TABLE VII. — *Weekly Per Capita Cost of Maintenance in State Institutions, etc. — Concluded.*

INSTITUTIONS.	BOTH PUBLIC AND PRIVATE PATIENTS.					
	AVERAGE WEEKLY PER CAPITA COST FOR THE YEAR.					FIVE YEARS' AVERAGE.
	A.	B. ¹	C.	D.	E.	
	By Superintendent.	On Net Expenditures.	B, less Sales of Products, Rent, Interest, etc.	C, less Increase of Value of Supplies on Hand.	D, less All Repairs and Improvements.	Computed on C. less Repairs and Improvements.
Insane hospitals : —						
Worcester,	\$4 25	\$4 32	\$4 23	\$4 20	\$3 69	\$3 54
Taunton,	4 06	4 19	4 15	4 27 ²	4 05	3 79
Northampton,	3 86	3 79	3 68	3 61	3 17	3 28
Danvers,	4 08	4 06	4 03	3 90	3 35	3 24
Westborough,	4 35	4 32	4 30	4 33 ²	4 01	3 79
Totals and averages,	\$4 13	\$4 15	\$4 09	\$4 07	\$3 65	\$3 50
Insane asylums : —						
Worcester,	\$3 88	\$3 90	\$3 89	\$3 97 ²	\$3 39	\$3 13
Medfield,	3 62	3 57	3 56	3 42	3 09	2 79
State Colony,	3 45	3 43	3 42	3 17	2 84	—
Totals and averages,	\$3 68	\$3 65	\$3 64	\$3 55	\$3 15	\$2 87 ³
Hospitals and asylums,	\$3 97	\$3 98	\$3 93	\$3 89	\$3 48	\$3 32 ³
Miscellaneous : —						
State Hospital, ⁴	\$3 02	\$3 02	\$3 01	\$2 92	\$2 59	\$2 54
State Farm, ⁴	2 27	2 27	2 04	2 01	1 91	2 10
Hospital for Epileptics,	4 16	4 13	4 09	3 90	3 52	3 91
Foxborough State Hospital,	5 87	5 81	5 48	5 56	5 13	5 16
School for the Feeble-minded,	3 65	3 62	3 61	3 44	3 05	3 07

¹ Expenditures, less sales of articles purchased.² Plus decrease.³ Exclusive of State Colony.⁴ Includes all departments.

COMPARATIVE EXPENDITURES.

TABLE VIII. — *Comparative Analysis of Net Expenditures¹ for Maintenance, by the Week, per Patient.*

INSTITUTIONS.	Average Number of Patients.	Food.		Clothing and Clothing Material.		Furnishings.		Heat, Light and Power.	
		1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —									
Worcester,	1,151	\$1.2156	\$1.1094	\$0.1904	\$0.1703	\$0.1494	\$0.1559	\$0.3981	\$0.4292
Taunton,	944	1.1016	1.0959	0.0978	0.1063	0.1353	0.1755	0.5254	0.4024
Northampton,	768	0.9356	0.9977	0.1076	0.1201	0.1148	0.1446	0.3555	0.3684
Danvers,	1,289	0.8240	0.8823	0.1639	0.1293	0.2057	0.1848	0.3365	0.3011
Westborough,	909	1.0220	1.0595	0.1414	0.0943	0.2297	0.1887	0.2621	0.3291
Totals and averages,	5,061	\$1.0204	\$1.0241	\$0.1447	\$0.1276	\$0.1630	\$0.1703	\$0.3772	\$0.3648
Insane asylums : —									
Worcester,	704	\$0.9309	\$1.0467	\$0.2282	\$0.2152	\$0.1960	\$0.1722	\$0.3353	\$0.3015
Medfield,	1,519	0.8789	0.8556	0.2542	0.1940	0.0994	0.1389	0.3462	0.2409
State Colony,	334	0.7024	—	0.2152	—	0.1642	—	0.3727	—
Totals and averages,	2,617	\$0.8729	\$0.9114	\$0.2419	\$0.1997	\$0.1356	\$0.1496	\$0.3402	\$0.2587
Hospitals and asylums,	7,678	\$0.9695	\$0.9899	\$0.1783	\$0.1497	\$0.1575	\$0.1639	\$0.3665	\$0.3328
Miscellaneous : —									
State Hospital, ²	1,515	\$0.7214	\$0.7429	\$0.2017	\$0.1809	\$0.1337	\$0.1127	\$0.3800	\$0.3506
State Farm, ²	1,867	0.6506	0.6824	0.1931	0.1910	0.0635	0.0626	0.2736	0.2783
Hospital for Epileptics,	527	0.9016	0.8977	0.0953	0.1101	0.1253	0.1352	0.4148	0.5627
Foxborough State Hospital,	204	1.2550	1.0516	0.1520	0.1234	0.1190	0.1382	0.5511	0.8096
School for the Feeble-minded,	1,057	0.8576	0.8072	0.2411	0.1737	0.1718	0.1459	0.2240	0.2629

NOTE. — State Colony excluded in five years' averages.

¹ Less sales of articles purchased.² Includes all departments.

TABLE VIII. — *Comparative Analysis of Net Expenditures¹ for Maintenance, by the Week, per Patient — Continued.*

INSTITUTIONS.	REPAIRS AND IMPROVEMENTS.		FARM, STABLE AND GROUNDS.		FREIGHT, EXPRESSAGE AND TRANSPORTATION.		WATER.	
	Average for Five Years.		Average for Five Years.		Average for Five Years.		Average for Five Years.	
	1906.		1906.		1906.		1906.	
Insane hospitals : —								
Worcester,	\$0.2722	\$0.3152	\$0.2737	\$0.2822	\$0.0042	\$0.0049	\$0.0901	\$0.0794
Taunton,	0.1827	0.1517	0.2873	0.3953	0.0210	0.0137	0.0771	0.0602
Northampton,	0.2689	0.2340	0.3427	0.3065	0.0327	0.0284	0.0724	0.0729
Danvers,	0.3782	0.2897	0.3758	0.3348	0.0733	0.0723	0.0758	0.0588
Westborough,	0.2480	0.2575	0.2885	0.2838	0.2932	0.1638	0.0051	0.0041
Totals and averages,	\$0.2764	\$0.2550	\$0.3147	\$0.3201	\$0.0789	\$0.0533	\$0.0666	\$0.0496
Insane asylums : —								
Worcester,	\$0.2786	\$0.2034	\$0.2013	\$0.1043	\$0.0268	\$0.0097	\$0.0481	\$0.0826
Medfield,	0.1754	0.1605	0.2859	0.2068	0.1575	0.1098	—	—
State Colony,	0.2694	—	0.2506	—	0.0296	—	—	—
Totals and averages,	\$0.2171	\$0.1736	\$0.2567	\$0.1761	\$0.1036	\$0.0793	\$0.0142	\$0.0099
Hospitals and asylums,	\$0.2559	\$0.2302	\$0.2947	\$0.2770	\$0.0874	\$0.0613	\$0.0485	\$0.0376
Miscellaneous : —								
State Hospital, ²	\$0.2581	\$0.2464	\$0.1714	\$0.1476	\$0.1586	\$0.1243	—	\$0.0010
State Farm, ²	0.0990	0.1046	0.1514	0.1828	0.0345	0.0367	—	—
Hospital for Epileptics,	0.2731	0.2939	0.2917	0.2585	0.0333	0.0526	\$0.0277	0.0330
Foxborough State Hospital,	0.4207	0.4392	0.4796	0.5846	0.0802	0.0920	0.1004	0.1066
School for the Feeble-minded,	0.2710	0.2648	0.2429	0.2521	0.0445	0.0387	0.0292	0.0372

NOTE. — State Colony excluded in five years' averages.

¹ Less sales of articles purchased.² Includes all departments.

COMPARATIVE EXPENDITURES.

TABLE VIII. — Comparative Analysis of Net Expenditures¹ for Maintenance, by the Week, per Patient — Concluded.

INSTITUTIONS.	FUNERAL EXPENSES, RETURNING ESCAPED PATIENTS, PRINTING ANNUAL REPORT.		MISCELLANEOUS.		TOTAL OF FOREGOING ITEMS.		PAY ROLL.		AGGREGATES.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —										
Worcester,	\$0.0160	\$0.0111	\$0.1260	\$0.1604	\$2.7347	\$2.7180	\$1.5875	\$1.4000	\$4.3222	\$4.1180
Taunton,	0.0072	0.0073	0.1885	0.1910	2.6239	2.5993	1.5657	1.4885	4.1896	4.0878
Northampton,	0.0066	0.0044	0.1815	0.1716	2.4183	2.4486	1.3681	1.2747	3.7864	3.7233
Danvers,	0.0030	0.0035	0.2008	0.2024	2.6370	2.4590	1.4182	1.3180	4.0552	3.7770
Westborough,	0.0033	0.0089	0.1994	0.1928	2.6987	2.5825	1.6209	1.5682	4.3196	4.1507
Totals and averages,	\$0.0085	\$0.0071	\$0.1775	\$0.1790	\$2.6339	\$2.5509	\$1.5133	\$1.4037	\$4.1472	\$3.9546
Insane asylums : —										
Worcester,	\$0.0076	\$0.0078	\$0.1996	\$0.1774	\$2.4524	\$2.2708	\$1.4520	\$1.2386	\$3.9044	\$3.5094
Medfield,	0.0072	0.0055	0.0917	0.0971	2.2964	2.0089	1.2756	1.0926	3.5720	3.1015
State Colony,	0.0130	—	0.1622	—	2.1793	—	1.2486	—	3.4279	—
Totals and averages,	\$0.0080	\$0.0062	\$0.1319	\$0.1212	\$2.3281	\$2.0857	\$1.3243	\$1.1367	\$3.6524	\$3.2224
Hospitals and asylums,	\$0.0083	\$0.0068	\$0.1617	\$0.1614	\$2.5283	\$2.4106	\$1.4481	\$1.3228	\$3.9764	\$3.7334
Miscellaneous : —										
State Hospital, ²	\$0.0101	\$0.0075	\$0.2378	\$0.2346	\$2.2728	\$2.1485	\$0.7492	\$0.6810	\$3.0220	\$2.8295
State Farm, ²	0.0067	0.0035	0.1618	0.1695	1.6342	1.7114	0.6355	0.6150	2.2637	2.3264
Hospital for Epileptics,	0.0181	0.0089	0.2632	0.3301	2.4471	2.6827	1.6846	1.7322	4.1317	4.4149
Foxborough State Hospital,	0.0993	0.1215	0.6036	0.6864	3.8609	4.1531	1.9508	2.0084	5.8117	6.1615
School for the Feeble-minded,	0.0037	0.0047	0.1654	0.1550	2.2512	2.1422	1.3655	1.3179	3.6167	3.4601

² Includes all departments.¹ Less sales of articles purchased.

NOTE. — State Colony excluded in five years' averages.

COST OF FOOD SUPPLIES.

TABLE IX. — *Comparative Cost of Food Supplies,¹ for All Persons fed, by the Week, Per Capita.*

INSTITUTIONS.	AVERAGE NUMBER OF PERSONS FED.			BUTTER AND BUTTER-FINE.		BEANS.		BREAD AND CRACKERS.	
	Patients.	Employees.	Totals.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —									
Worcester,	1,151	241	1,392	\$0.1625	\$0.1424	\$0.0115	\$0.0099	\$0.0074	\$0.0074
Taunton,	944	206	1,150	0.2123	0.1773	0.0131	0.0122	0.0083	0.0113
Northampton,	768	130	898	0.1181	0.1483	0.0072	0.0065	0.0125	0.0166
Danvers,	1,289	216	1,505	0.1103	0.1101	0.0144	0.0167	0.0076	0.0085
Westborough,	909	219	1,128	0.0989	0.1071	0.0140	0.0143	0.0032	0.0032
Totals and averages,	5,061	1,012	6,073	\$0.1416	\$0.1359	\$0.0123	\$0.0122	\$0.0076	\$0.0090
Insane asylums : —									
Worcester,	764	140	904	\$0.1260	\$0.1244	\$0.0030	\$0.0078	\$0.0115	\$0.0116
Medfield,	1,519	257	1,776	0.0719	0.0771	0.0035	0.0038	0.0042	0.0042
State Colony,	334	52	386	0.0622	—	0.0118	—	0.0068	—
Totals and averages,	2,617	449	3,066	\$0.0868	\$0.0917	\$0.0036	\$0.0091	\$0.0067	\$0.0065
Hospitals and asylums,	7,678	1,461	9,139	\$0.1230	\$0.1227	\$0.0114	\$0.0113	\$0.0073	\$0.0082
Miscellaneous : —									
State Hospital, ²	1,515	152	1,667	\$0.0889	\$0.0982	\$0.0139	\$0.0127	\$0.0013	\$0.0013
State Farm, ²	1,867	115	1,982	0.0191	0.0217	0.0240	0.0245	0.0017	0.0013
Hospital for Epileptics,	527	125	652	0.1299	0.1261	0.0015	0.0028	0.0093	0.0081
Foxborough State Hospital,	204	46	250	0.1514	0.1232	0.0174	0.0204	0.0046	0.0079
School for the Feeble-minded,	1,657	207	1,264	0.0630	0.0612	0.0133	0.0158	0.0010	0.0027

NOTE. — State Colony excluded in five years' averages.

¹ Less sales of articles purchased.² Includes all departments.

TABLE IX. — Comparative Cost of Food Supplies,¹ for All Persons fed, by the Week, Per Capita — Continued.

INSTITUTIONS.	CEREALS, RICE, MEAL, ETC.		CHEESE.		EGGS.		FLOUR.		FISH.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —										
Worcester,	\$0.0228	\$0.0214	\$0.0104	\$0.0114	\$0.0842	\$0.0812	\$0.1129	\$0.1115	\$0.0530	\$0.0473
Taunton,	0.0250	0.0230	0.0062	0.0089	0.0568	0.0530	0.1220	0.1184	0.0411	0.0496
Norhampton,	0.0243	0.0208	0.0064	0.0046	0.1233	0.1301	0.0863	0.1079	0.0460	0.0462
Danvers,	0.0244	0.0230	0.0184	0.0153	0.0258	0.0288	0.1273	0.1332	0.0356	0.0382
Westborough,	0.0212	0.0239	0.0025	0.0013	0.0481	0.0476	0.0875	0.1144	0.0471	0.0470
Totals and averages,	\$0.0237	\$0.0223	\$0.0095	\$0.0092	\$0.0644	\$0.0641	\$0.1095	\$0.1182	\$0.0444	\$0.0454
Insane asylums : —										
Worcester,	\$0.0149	\$0.0115	\$0.0114	\$0.0092	\$0.0306	\$0.0384	\$0.1517	\$0.1408	\$0.0339	\$0.0358
Medfield,	0.0265	0.0212	0.0119	0.0104	0.0525	0.0424	0.1016	0.1025	0.0234	0.0297
State Colony,	0.0235	—	0.0015	—	0.0019	—	0.1503	—	0.0450	—
Totals and averages,	\$0.0227	\$0.0182	\$0.0105	\$0.0100	\$0.0400	\$0.0411	\$0.1223	\$0.1145	\$0.0291	\$0.0315
Hospitals and asylums,	\$0.0234	\$0.0212	\$0.0098	\$0.0095	\$0.0561	\$0.0573	\$0.1139	\$0.1172	\$0.0392	\$0.0412
Miscellaneous : —										
State Hospital, ²	\$0.0208	\$0.0144	\$0.0020	\$0.0012	\$0.0399	\$0.0321	\$0.0982	\$0.1354	\$0.0373	\$0.0349
State Farm, ²	0.0107	0.0110	0.0001	0.0021	0.0096	0.0079	0.1358	0.1663	0.0409	0.0375
Hospital for Epileptics,	0.0336	0.0288	0.0022	0.0020	0.0551	0.0530	0.0728	0.0949	0.0415	0.0317
Foxborough State Hospital,	0.0206	0.0168	0.0138	0.0069	0.0332	0.0223	0.1421	0.1286	0.0678	0.0628
School for the Feeble-minded,	0.0233	0.0282	0.0022	0.0020	0.0171	0.0131	0.1218	0.1150	0.0201	0.0173

NOTE. — State Colony excluded in five years' averages.

¹ Less sales of articles purchased.² Includes all departments.

COST OF FOOD SUPPLIES.

TABLE IX. — Comparative Cost of Food Supplies,¹ for All Persons fed, by the Week, Per Capita — Continued.

INSTITUTIONS.	FRUIT.		MEAT.		MILK.		MOLASSES.		SUGAR.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —										
Worcester,	\$0.0488	\$0.0407	\$0.2865	\$0.2448	\$0.0068	\$0.0005	\$0.0077	\$0.0066	\$0.0718	\$0.0719
Taunton,	0.0329	0.0307	0.2232	0.1770	—	—	0.0074	0.0088	0.0424	0.0430
Northampton,	0.0454	0.0362	0.1502	0.1791	0.0234	0.0183	0.0104	0.0112	0.0749	0.0644
Danvers,	0.0292	0.0242	0.1517	0.2130	0.0059	0.0018	0.0118	0.0123	0.0359	0.0392
Westborough,	0.0554	0.0496	0.2523	0.2621	0.0072	0.0014	0.0100	0.0069	0.0528	0.0536
Totals and averages,	\$0.0405	\$0.0355	\$0.2152	\$0.2366	\$0.0065	\$0.0035	\$0.0094	\$0.0092	\$0.0546	\$0.0540
Insane asylums : —										
Worcester,	\$0.0266	\$0.0363	\$0.1737	\$0.1598	\$0.0265	\$0.1439	\$0.0059	\$0.0069	\$0.0381	\$0.0379
Medfield,	0.0543	0.0288	0.1858	0.1960	0.0414	0.0444	0.0033	0.0027	0.0498	0.0532
State Colony,	0.0690	—	0.1505	—	—	—	0.0049	—	0.0360	—
Totals and averages,	\$0.0407	\$0.0308	\$0.1780	\$0.1851	\$0.0320	\$0.0740	\$0.0043	\$0.0040	\$0.0446	\$0.0485
Hospitals and asylums,	\$0.0405	\$0.0341	\$0.2025	\$0.2214	\$0.0151	\$0.0244	\$0.0077	\$0.0075	\$0.0512	\$0.0523
Miscellaneous : —										
State Hospital, ²	\$0.0169	\$0.0098	\$0.1825	\$0.2055	\$0.0496	\$0.0214	\$0.0050	\$0.0058	\$0.0337	\$0.0323
State Farm, ²	0.0103	0.0077	0.2321	0.2540	0.0100	0.0040	0.0134	0.0088	0.0303	0.0355
Hospital for Epileptics,	0.0321	0.0303	0.2091	0.1877	0.0053	0.0087	0.0116	0.0125	0.0407	0.0477
Foxborough State Hospital,	0.0430	0.0352	0.2992	0.2332	—	—	0.0235	0.0229	0.0588	0.0478
School for the Feeble-minded,	0.0185	0.0151	0.1523	0.1481	0.1640	0.1528	0.0069	0.0071	0.0399	0.0441

NOTE. — State Colony excluded in five years' averages.

¹ Less sales of articles purchased.² Includes all departments.

COST OF FOOD SUPPLIES.

TABLE IX. — Comparative Cost of Food Supplies,¹ for All Persons fed, by the Week, Per Capita — Concluded.

INSTITUTIONS.	TEA, COFFEE, BROMA AND COCOA.		VEGETABLES.		SUNDRIES.		TOTALS.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —								
Worcester,	\$0.0221	\$0.0254	\$0.0099	\$0.0649	\$0.0379	\$0.0417	\$1.0052	\$0.9290
Taunton,	0.0387	0.0354	0.0143	0.0305	0.0296	0.0272	0.9043	0.9063
Northampton,	0.0294	0.0296	0.0192	0.0155	0.0231	0.0238	0.8001	0.8591
Danvers,	0.0325	0.0259	0.0015	0.0467	0.0134	0.0196	0.7057	0.7565
Westborough,	0.0407	0.0387	0.0594	0.0562	0.0233	0.0297	0.8236	0.8570
Totals and averages,	\$0.0322	\$0.0304	\$0.0533	\$0.0450	\$0.0256	\$0.0288	\$0.8503	\$0.8593
Insane asylums : —								
Worcester,	\$0.0279	\$0.0262	\$0.0033	\$0.0677	\$0.0357	\$0.0338	\$0.7867	\$0.8920
Medfield,	0.0381	0.0387	0.0614	0.0462	0.0161	0.0370	0.7517	0.7443
State Colony,	0.0242	—	0.0388	—	0.0424	—	0.6078	—
Totals and averages,	\$0.0334	\$0.0349	\$0.0593	\$0.0526	\$0.0250	\$0.0361	\$0.7450	\$0.7886
Hospitals and asylums,	\$0.0326	\$0.0317	\$0.0554	\$0.0473	\$0.0254	\$0.0309	\$0.8145	\$0.8382
Miscellaneous : —								
State Hospital, ²	\$0.0212	\$0.0210	\$0.0189	\$0.0242	\$0.0256	\$0.0313	\$0.6557	\$0.6815
State Farm, ²	0.0208	0.0233	0.0394	0.0230	0.0147	0.0145	0.6129	0.6431
Hospital for Epileptics,	0.0115	0.0134	0.0541	0.0518	0.0184	0.0234	0.7287	0.7229
Foxborough State Hospital,	0.0362	0.0317	0.0463	0.0289	0.0662	0.0570	1.0241	0.8486
School for the Feeble-minded,	0.0104	0.0089	0.0386	0.0323	0.0187	0.0193	0.7171	0.6830

NOTE. — State Colony excluded in five years' averages.

¹ Less sales of articles purchased.² Includes all departments.

PAY ROLL BY DEPARTMENTS.

TABLE X. — *Comparative Analysis of Pay Roll, by Departments.*

INSTITUTIONS.	MEDICAL SERVICE.				WARD SERVICE.			
	AVERAGE NUMBER OF PERSONS.		AVERAGE MONTHLY COMPENSATION.		AVERAGE WEEKLY PER CAPITA COST.		AVERAGE NUMBER OF PERSONS.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	MEN.	
							1906.	Average for Five Years.
Insane hospitals : —								
Worcester,	13.50	14.12	\$74.35	\$75.68	\$0.2012	\$0.2106	55.38	56.28
Taunton,	11.87	11.59	85.88	81.62	0.2492	0.2339	50.93	49.44
Northampton,	5.34	4.89	101.85	104.74	0.1634	0.1657	32.13	27.91
Danvers,	13.97	12.24	78.38	77.10	0.1950	0.1773	60.01	54.74
Westborough,	10.70	10.22	87.86	84.72	0.2373	0.2463	42.82	40.98
Totals and averages,	55.38	53.06	\$83.12	\$81.58	\$0.2092	\$0.2058	241.27	229.35
Insane asylums : —								
Worcester,	6.06	5.00	\$90.00	\$89.45	\$0.1647	\$0.1577	33.59	25.37
Medfield,	7.04	6.16	100.82	100.02	0.1078	0.0985	48.09	41.53
State Colony,	2.41	—	137.25	—	0.2273	—	15.34	—
Totals and averages,	15.51	11.16	\$101.89	\$95.47	\$0.1390	\$0.1164	97.02	66.90
Hospitals and asylums,	70.89	64.22	\$87.29	\$84.00	\$0.1850	\$0.1787	338.29	296.25
Miscellaneous : —								
State Hospital,	8.55	7.77	\$100.46	\$97.87	\$0.1301	\$0.1232	22.70	18.86
Hospital for Epileptics,	4.89	4.52	102.14	102.51	0.2187	0.2449	32.70	24.89
Foxborough State Hospital,	4.57	4.50	107.77	95.90	0.5541	0.5953	16.43	15.09
School for the Feeble-minded,	4.21	3.74	166.98	157.70	0.1526	0.1546	26.58	19.07 ²
Totals and averages,	15.51	11.16	\$101.89	\$95.47	\$0.1390	\$0.1164	97.02	66.90
Hospitals and asylums,	70.89	64.22	\$87.29	\$84.00	\$0.1850	\$0.1787	338.29	296.25
Miscellaneous : —								
State Hospital,	8.55	7.77	\$100.46	\$97.87	\$0.1301	\$0.1232	22.70	18.86
Hospital for Epileptics,	4.89	4.52	102.14	102.51	0.2187	0.2449	32.70	24.89
Foxborough State Hospital,	4.57	4.50	107.77	95.90	0.5541	0.5953	16.43	15.09
School for the Feeble-minded,	4.21	3.74	166.98	157.70	0.1526	0.1546	26.58	19.07 ²

NOTE. — State Colony not included in averages for five years.

¹ Includes all departments.² Average for three years.

PAY ROLL BY DEPARTMENTS.

TABLE X. — *Comparative Analysis of Pay Roll, by Departments — Continued.*

WARD SERVICE — Continued.													
INSTITUTIONS.		NUMBER OF PATIENTS TO ONE NURSE.				AVERAGE MONTHLY COMPENSATION.							
		MEN.		WOMEN.		TOTALS.		MEN.		WOMEN.		TOTALS.	
		1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals: —													
	Worcester,	10.53	10.23	8.48	7.47	8.76	9.24	\$25.54	\$25.58	\$18.73	\$18.21	\$21.60	\$21.50
	Taunton,	9.72	10.04	8.07	7.41	8.46	8.99	26.75	26.92	21.06	21.60	23.66	23.65
	Northampton, . . .	12.23	13.23	11.34	10.15	11.12	12.19	26.49	26.23	19.92	19.17	22.97	22.45
	Danvers,	9.67	10.77	10.39	10.17	9.94	10.52	25.91	26.26	19.08	19.19	22.24	22.53
	Westborough, . . .	8.59	8.16	7.97	7.33	7.79	8.04	24.59	24.34	17.64	17.87	20.19	20.50
Totals and averages, .		10.03	10.27	9.01	8.33	9.06	9.57	\$25.86	\$25.80	\$19.16	\$18.98	\$22.06	\$22.09
Insane asylums: —													
	Worcester,	10.87	12.04	12.24	11.06	10.97	12.12	\$25.42	\$24.40	\$17.20	\$16.92	\$21.16	\$20.48
	Medfield,	11.23	13.39	12.57	10.67	10.86	12.85	27.46	27.25	21.54	19.97	23.57	22.64
	State Colony, . . .	14.08	—	—	15.21	14.46	—	23.20	—	20.32	—	22.23	—
Totals and averages, .		11.55	12.88	12.34	11.03	11.25	12.60	\$26.11	\$26.18	\$20.31	\$19.15	\$22.72	\$21.96
Hospitals and asylums, .		10.46	10.84	9.93	9.14	9.71	10.31	\$25.93	\$25.96	\$19.51	\$19.04	\$22.26	\$22.08
Miscellaneous: —													
	State Hospital, ¹ . . .	—	—	—	—	20.49	20.15	\$24.65	\$24.55	\$19.69	\$19.58	\$21.22	\$20.88
	Hospital for Epileptics, .	8.59	9.30	8.89	8.51	8.55	9.09	26.39	25.23	19.70	18.76	23.25	22.03
	Foxborough State Hospital, .	12.42	11.61	—	—	12.42	11.61	29.81	29.68	—	—	29.83	29.68
	School for the Feeble-minded, .	23.78	28.30	4.38	3.51	7.16	9.08	28.00	26.51	21.46	19.98	22.67	21.30

NOTE. — State Colony not included in averages for five years.

¹ Includes all departments.

PAY ROLL BY DEPARTMENTS.

TABLE X. — *Comparative Analysis of Pay Roll, by Departments* — Continued.

INSTITUTIONS.	WARD SERVICE—Con.				GENERAL ADMINISTRATION.			
	AVERAGE WEEKLY PER CAPITA COST.		AVERAGE NUMBER OF PERSONS.		AVERAGE MONTHLY COMPENSATION.		AVERAGE WEEKLY PER CAPITA COST.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —								
Worcester,	\$0.5692	\$0.5377	64.41	56.51	\$29.70	\$27.91	\$0.3835	\$0.3122
Taunton,	0.6451	0.6164	71.55	61.06	26.64	25.95	0.4660	0.3917
Northampton,	0.4708	0.4278	36.28	32.53	34.40	33.43	0.3751	0.3508
Danvers,	0.5136	0.4941	59.48	57.42	32.35	29.36	0.3427	0.3188
Westborough,	0.5948	0.5883	71.54	60.40	28.92	27.97	0.5224	0.4796
Totals and averages,	\$0.5601	\$0.5332	303.26	267.97	\$29.86	\$28.44	\$0.4120	\$0.3622
Insane asylums : —								
Worcester,	\$0.4452	\$0.3922	52.19	41.60	\$25.93	\$24.66	\$0.4088	\$0.3903
Medfield,	0.5008	0.4126	93.73	81.74	27.84	29.14	0.3964	0.3923
State Colony,	0.3529	—	22.45	—	29.90	—	0.4613	—
Totals and averages,	\$0.4666	\$0.4059	168.37	123.34	\$27.50	\$27.64	\$0.4079	\$0.3718
Hospitals and asylums,	\$0.5278	\$0.4947	471.63	391.31	\$29.01	\$28.17	\$0.4106	\$0.3650
Miscellaneous : —								
State Hospital, ¹	\$0.2378	\$0.2389	45.17	38.85	\$35.30	\$35.00	\$0.2415	\$0.2197
Hospital for Epileptics,	0.6273	0.5617	43.07	37.25	26.94	27.26	0.5080	0.5357
Foxborough State Hospital,	0.5510	0.5885	17.99	16.11	31.09	30.28	0.6292	0.6419
School for the Feeble-minded,	0.7271	0.5524	45.32	44.59	26.36	31.49	0.2594	0.3790

NOTE. — State Colony not included in averages for five years.

¹ Includes all departments.

PAY ROLL BY DEPARTMENTS.

TABLE X. — *Comparative Analysis of Pay Roll, by Departments — Continued.*

INSTITUTIONS.	REPAIRS AND IMPROVEMENTS.				FARM, STABLE AND GROUNDS.			
	AVERAGE NUMBER OF PERSONS.		AVERAGE MONTHLY COMPENSATION.		AVERAGE NUMBER OF PERSONS.		AVERAGE MONTHLY COMPENSATION.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —								
Worcester,	13.73	10.68	\$84 71	\$82 22	35.52	30.54	\$28 13	\$27 77
Taunton,	1.84	3.89	76 32	72 86	20.09	21.65	34 84	33 75
Northampton,	7.86	7.20	62 48	57 62	18.37	16.91	37 19	35 68
Danvers,	14.28	13.94	66 28	65 02	28.53	23.22	39 06	35 58
Westborough,	3.23	2.94	80 71	67 61	26.82	23.64	29 63	28 70
Totals and averages,	40.94	38.65	\$73 45	\$69 18	129.33	115.96	\$33 14	\$31 60
Insane asylums : —								
Worcester,	17.51	11.56	\$56 64	\$61 96	14.86	8.32	\$29 77	\$35 83
Medfield,	15.20	12.13	64 13	59 67	29.32	22.29	27 50	27 84
State Colony,	1.25	—	70 28	—	6.10	—	35 00	—
Totals and averages,	33.96	23.69	\$60 47	\$57 47	50.28	30.61	\$29 04	\$29 21
Hospitals and asylums,	74.90	62.34	\$67 48	\$64 41	179.61	146.57	\$31 96	\$31 42
Miscellaneous : —								
State Hospital, ¹	7.42	2.97	\$62 30	\$60 88	16.80	15.14	\$27 44	\$28 96
Hospital for Epileptics,	3.65	4.43	67 21	64 54	16.94	15.04	30 09	29 82
Foxborough State Hospital, . . . . .	.47	0.51	30 15	25 05	6.52	5.02	27 34	24 87
School for the Feeble-minded,	6.53	4.83	87 60	91 11	14.06	13.25	33 48	33 73
Totals and averages,	110.42	79.42	\$147 36	\$142 61	247.63	214.21	\$37 26	\$37 13

NOTE. — State Colony not included in averages for five years.

¹ Includes all departments.

PAY ROLL BY DEPARTMENTS.

TABLE X. — *Comparative Analysis of Pay Roll, by Departments — Concluded.*

INSTITUTIONS.	ALL PERSONS EMPLOYED.						EXTRA SERVICE.	
	AVERAGE NUMBER OF PERSONS.		NUMBER OF PATIENTS TO ONE EMPLOYEE.		AVERAGE MONTHLY COMPENSATION.		AVERAGE WEEKLY PER CAPITA COST.	
	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.	1906.	Average for Five Years.
Insane hospitals : —								
Worcester,	258.61	238.51	4.45	4.91	\$30.62	\$29.72	\$1.5875	\$1.4000
Taunton,	216.87	203.81	4.35	4.63	29.53	29.61	1.5657	1.4885
Northampton,	136.92	121.10	5.61	5.93	33.25	32.75	1.3681	1.2747
Danvers,	245.96	222.94	5.24	5.46	32.38	31.27	1.4182	1.3180
Westborough,	228.95	198.22	3.97	4.09	28.04	27.84	1.6209	1.5082
Totals and averages,	1,087.31	984.58	4.65	4.94	\$30.60	\$30.04	\$1.5133	\$1.4037
Insane asylums : —								
Worcester,	160.27	119.53	4.77	5.41	\$29.99	\$28.85	\$1.4520	\$1.2386
Medfield,	285.14	238.82	5.33	6.23	29.45	29.29	1.2756	1.0926
State Colony,	55.31	—	6.04	—	32.85	—	1.2486	—
Totals and averages,	500.72	358.35	5.23	5.96	\$29.98	\$29.15	\$1.3243	\$1.1367
Hospitals and asylums,	1,588.03	1,342.93	4.83	5.21	\$30.40	\$29.80	\$1.4481	\$1.3228
Miscellaneous : —								
State Hospital, ¹	151.89	135.40	9.97	10.34	\$32.56	\$31.09	\$0.7492	\$0.6810
Hospital for Epileptics,	130.17	110.12	4.05	3.99	29.55	29.94	1.6846	1.7322
Foxborough State Hospital,	45.98	41.24	4.44	4.24	37.71	36.51	1.9508	2.0084
School for the Feeble-minded,	217.81	164.65	4.85	5.30	28.87	30.29	1.3655	1.3179
Totals and averages,	500.72	358.35	5.23	5.96	\$29.98	\$29.15	\$1.3243	\$1.1367
Hospitals and asylums,	1,588.03	1,342.93	4.83	5.21	\$30.40	\$29.80	\$1.4481	\$1.3228
Miscellaneous : —								
State Hospital, ¹	151.89	135.40	9.97	10.34	\$32.56	\$31.09	\$0.7492	\$0.6810
Hospital for Epileptics,	130.17	110.12	4.05	3.99	29.55	29.94	1.6846	1.7322
Foxborough State Hospital,	45.98	41.24	4.44	4.24	37.71	36.51	1.9508	2.0084
School for the Feeble-minded,	217.81	164.65	4.85	5.30	28.87	30.29	1.3655	1.3179

NOTE. — State Colony not included in averages for five years.

¹ Includes all departments.

STATISTICAL FORM FOR STATE INSTITUTIONS.

Statistical Form for State Institutions, — Prepared in Accordance with a Resolution of the National Conference of Charities and Correction, adopted May 15, 1906.

INSTITUTIONS.	Superintendent.	POPULATION.						NUMBER DISCHARGED OR DIED DURING THE YEAR.		
		NUMBER OF INMATES PRESENT AT BEGINNING OF FISCAL YEAR.		NUMBER RECEIVED DURING THE YEAR.		Total.	Male.	Female.	Total.	Male.
		Male.	Female.	Male.	Female.					
Worcester Insane Hospital, .	Hosea M. Quinby, M.D.,	589	613	1,202	263	223	486	317	596	279
Taunton Insane Hospital, .	Arthur V. Goss, M.D.,	481	427	908	286	225	511	207	476	269
Northampton State Hospital,	John A. Houston, M.D.,	397	374	771	152	137	289	133	289	156
Danvers Insane Hospital, .	Chas. W. Page, M.D.,	641	722	1,363	311	295	606	323	742	419
Westborough Insane Hospital,	George S. Adams, M.D.,	367	535	902	225	303	528	306	503	197
Worcester Insane Asylum, .	Ernest V. Scribner, M.D.,	360	344	704	31	171	202	37	66	29
Medfield Insane Asylum, .	Edward French, M.D.,	551	1,003	1,554	9	12	21	63	89	26
State Colony for the Insane,	Joseph B. Howland, M.D.,	152	101	253	160	32	192	8	42	34
Hospital for Epileptics, .	Everett Flood, M.D.,	268	253	521	102	71	173	76	163	87
Foxborough State Hospital,	Chas. E. Woodbury, M.D.,	203	-	203	389	-	389	-	371	371
School for the Feeble-minded,	Walter E. Fernald, M.D.,	617	411	1,028	110	77	187	36	95	59

STATISTICAL FORM FOR STATE INSTITUTIONS.

Statistical Form for State Institutions — Continued.

INSTITUTIONS.	Superintendent.	POPULATION.						Average Number of Officers and Employees during the Year.
		NUMBER AT END OF THE FISCAL YEAR.			DAILY AVERAGE ATTENDANCE DURING THE YEAR.			
		Male.	Female.	Total.	Male.	Female.	Total.	
Worcester Insane Hospital,	Hosea M. Quinby, M.D.,	573	519	1,092	583	575	1,158	259
Taunton Insane Hospital,	Arthur V. Goss, M.D.,	498	445	943	496	449	945	217
Northampton State Hospital,	John A. Houston, M.D.,	393	378	771	393	374	767	137
Danvers Insane Hospital,	Chas. W. Page, M.D.,	533	694	1,227	585	711	1,296	246
Westborough Insane Hospital,	George S. Adams, M.D.,	395	532	927	365	540	905	229
Worcester Insane Asylum,	Ernest V. Scribner, M.D.,	362	478	840	365	391	756	160
Medfield Insane Asylum,	Edward French, M.D.,	534	952	1,486	540	983	1,523	285
State Colony for the Insane,	Joseph B. Howland, M.D.,	278	125	403	207	117	324	55
Hospital for Epileptics,	Everett Flood, M.D.,	283	248	531	280	246	526	130
Foxborough State Hospital,	Chas. E. Woodbury, M.D.,	221	-	221	201	-	201	46
School for the Feeble-minded,	Walter E. Fernald, M.D.,	668	452	1,120	625	419	1,044	218

STATISTICAL FORM FOR STATE INSTITUTIONS.

Statistical Form for State Institutions — Concluded.

INSTITUTIONS.	EXPENDITURES.						New Buildings, Permanent Improvements, Land, etc.	Grand Total.
	CURRENT EXPENSES.							
	Salaries and Wages.	Clothing.	Subsistence.	Ordinary Repairs.	Office, Domestic and Out-door Expenses.	Total.		
Worcester Insane Hospital,	\$118,768 32	\$15,244 14	\$91,212 48	\$20,364 46	\$82,173 46	\$327,762 86	\$20,162 58	\$347,925 44
Taunton Insane Hospital,	96,074 77	6,476 99	67,625 89	11,210 68	77,271 32	258,659 65	69,067 31	327,726 96
Northampton State Hospital,	68,297 92	5,590 49	46,715 91	14,635 41	55,999 29	191,239 02	9,191 44	200,430 46
Danvers Insane Hospital,	111,509 69	13,741 70	65,172 91	30,140 68	123,587 87	344,152 85	27 077 94	371,230 79
Westborough Insane Hospital,	89,879 64	8,290 58	56,936 90	13,918 68	71,972 38	240,998 18	34,478 63	275,476 81
Worcester Insane Asylum,	72,104 94	11,722 92	46,227 01	13,833 71	50,578 60	194,467 18	117,896 66	312,363 84
Medfield Insane Asylum,	125,951 26	26,161 48	87,144 22	17,741 43	100,021 24	357,019 63	85,289 90	442,309 53
State Colony for the Insane,	25,438 47	4,420 82	14,310 90	5,488 25	20,242 61	69,901 05	84,023 45	153,924 50
Hospital for Epileptics,	57,707 10	3,645 85	31,052 87	9,463 15	40,673 61	142,542 58	82,096 73	224,639 31
Foxborough State Hospital,	24,275 31	1,890 96	15,623 04	5,235 06	28,881 74	75,906 11	81,809 61	157,715 72
School for the Feeble-minded,	88,044 05	16,926 72	55,344 50	17,489 12	56,941 67	234,746 06	87,327 78	322,073 84

NOTES ON CURRENT EXPENSES. — Salaries and wages should include salaries of trustees or directors, if any. Clothing includes shoes and also materials for clothing and shoes if they are manufactured in the institution. Ordinary repairs include all of those which simply maintain the buildings in condition without adding to them. Any repairs which are of the nature of additions should be classed with "permanent improvements." Office, domestic and out-door expenses include everything not otherwise provided for, *e.g.*, furniture, bedding, laundry supplies, medicines, engineer's supplies, postage, freight, library, etc.

GENERAL STATISTICS.

CLASSES OF PERSONS UNDER SUPERVISION.

	NUMBER.			INCREASE FOR THE YEAR.			NON-RESIDENT.			EPILEPTIC.			CRIMINAL.			OTHER CLASSES.						TOTAL INMATES.		
	Males.		Females.	Males.		Females.	Males.		Females.	Males.		Females.	Males.		Females.	VOLUNTARY.		INEBRI-ATES.		Totals.		Males.	Females.	Totals.
	Totals.		Totals.	Totals.		Totals.	Totals.		Totals.	Totals.		Totals.	Totals.		Totals.	Totals.		Totals.		Totals.		Totals.		Totals.
A. — Insane : —																								
Public institutions : —																								
Worcester Hospital,	573	513	1,086	161	96 ¹	112 ¹	—	—	—	32	15	47	7	16	23	—	—	—	—	—	—	573	519	1,092
Taunton Hospital,	498	442	940	17	18	35	—	—	—	27	12	39	8	3	11	—	—	—	—	—	—	498	445	943
Northampton Hospital,	393	377	770 ²	41	4	—	—	—	—	13	10	23	4	2	6	—	—	—	—	—	—	393	378	771
Danvers Hospital,	533	689	1,222	108 ¹	30 ¹	138 ^{1,3}	—	—	—	16	5	21	4	2	6	—	—	—	—	—	—	533	694	1,227
Westborough Hospital,	380	515	903 ⁴	24	91	15	1	2	3	14	8	22	1	—	—	—	—	—	—	—	—	380	532	912
Boston Insane Asylum,	301	407	708	171	23	16	—	—	—	3	12	11	—	—	—	—	—	—	—	—	—	301	407	708
Insane wards, State Hospital,	182	382	564	23	76	89	—	—	—	18	15	33	—	—	—	—	—	—	—	—	—	182	382	564
Worcester Asylum,	362	478	840	2	134	136	—	—	—	37	37	74	2	8	10	—	—	—	—	—	—	362	478	840
Medfield Asylum,	534	952	1,486	171	51	168	—	—	—	32	38	70	7	13	20	—	—	—	—	—	—	534	952	1,486
State Colony,	278	125	403	126	24	150	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	278	125	403
Hospital for Epileptics,	147	120	267	6	20	14 ¹	—	—	—	147	120	267	—	—	—	—	—	—	—	—	—	283	248	531
Asylum for Insane Criminals,	524	—	524	1	—	—	—	—	—	25	—	—	494	—	—	—	—	—	—	—	—	524	—	524
Foxborough State Hospital,	112	—	112	62	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	221	—	221
Total,	4,826	5,000	9,826	99	73	172 ³	1	5	6	375	271	646	526	42	568	142	138	280	109	22	131	5,077	5,100	10,237
Family care,	13	272	285	1	31	32	—	—	—	—	2	2	—	—	—	—	—	—	—	—	—	13	272	285
Total public,	4,839	5,272	10,111	100	104	204 ³	1	5	6	375	273	648	526	42	568	142	138	280	109	22	131	5,090	5,432	10,522
Private institutions : —																								
McLean Hospital,	89	94	183	8	41	4	16	22	38	—	—	—	—	—	—	—	—	—	—	—	—	90	94	184
Smaller institutions,	12	65	77	—	11	11	3	9	12	—	2	2	—	—	—	31	60	91	3	1	4	46	126	172
Total private,	101	159	260	8	7	15	19	31	50	—	2	2	—	—	—	31	60	91	4	1	5	136	220	356
Total public and private,	4,940	5,431	10,371	108	111	219 ³	20	36	56	375	275	650	526	42	568	173	198	371	113	23	136	5,226	5,652	10,878

¹ Decrease.² Includes 9 placed in family care by trustees.³ One patient reported as insane Oct. 1, 1905, should have appeared with inebriates; excluded when figuring increase.⁴ Includes 1 placed in family care by trustees.TABLE XI. — *Classes of Persons under Supervision, their Number and Location, Oct. 1, 1906, and their Increase for the Year.*

CLASSES OF PERSONS UNDER SUPERVISION.

TABLE XI. — *Classes of Persons under Supervision, etc. — Concluded.*

	NUMBER.			INCREASE FOR THE YEAR.			NON-RESIDENT.			EPILEPTICS.			SCHOOL.			CUSTODIAL.			OTHER CLASSES.			TOTAL INMATES.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
B. — Feeble-minded : —																								
School for the Feeble-minded,	668	452	1,120	51	41	92	24	22	46	43	22	65	332	179	511	336	273	609	76	47	123	668	452	1,120
Hospital Cottages,	8	9	17	1	1	2	—	—	—	—	—	—	3	5	8	4	4	8	—	—	—	84	56	140
Dr. Brown's Institution,	46	13	59	21	21	42	33	10	43	4	2	6	16	9	25	29	5	34	—	—	—	46	13	59
Almshouses, ²	97	94	191	19 ¹	16 ¹	35 ¹	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	97	94	191
Total feeble-minded,	819	568	1,387	31	25	56	57	32	89	47	24	71	351	193	544	369	282	651	76	47	123	895	615	1,510
C. — Inebriates : —																								
Foxborough State Hospital,	109	—	109	44 ¹	—	44 ¹	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Insane hospitals,	—	22	22	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Private institutions,	—	1	5	2	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total inebriates,	113	23	136	42 ¹	8	34 ¹	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
D. — Epileptics : —																								
Hospital for Epileptics,	283	248	531	15	5 ¹	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Insane hospitals,	115	62	177	5	5 ¹	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Insane asylums,	114	90	204	2	21	23	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
School for the Feeble-minded,	43	22	65	3 ¹	4 ¹	7 ¹	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hospital Cottages,	61	34	95	3 ¹	2 ¹	5 ¹	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Family care,	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Private institutions,	6	6	12	3 ¹	2	1 ¹	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total epileptics,	622	464	1,086	13	7	20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whole number of persons under supervision,	6,121	6,267	12,388	104	170	274	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6,121	6,267	12,388

¹ Decrease.² Figures taken from reports of overseers of poor, March 31, 1906.³ One patient reported as insane Oct. 1, 1905, which should have appeared with inebriates. Included when figuring decrease.

ADMISSIONS, DISCHARGES, ETC.

TABLE XII. — *Admissions, Discharges, etc., of the Insane in Institutions and boarded in Private Families for the Year ending Sept. 30, 1906.*

	Worcester Hospital.	Taunton Hospital.	Northampton Hospital.	Danvers Hospital.	Westborough Hospital.	Boston Insane Hospital.	Insane Wards.	Worcester Asylum.	Medford Asylum.	State Colony.
Remaining Sept. 30, 1905,										
Men,	1,198	905	770	1,360 ¹	889	692	475	704	1,554	253
Women,	589	424	397	719	365	318	316	360	551	152
	609		373		524	374		344	1,003	401
Admitted within the year,										
Men,	479	502	287	602	481	404	212	202	21	192
Women,	263	286	152	310	212	151	62	31	9	160
By commitment,	216	216	135	292	269	253	150	171	12	32
Men,	433	429	254	520	395	298	68	—	—	—
Women,	242	249	135	272	177	120	34	—	—	—
By transfer,	191	180	119	248	218	178	34	—	—	—
From visit,	16	21	3	21	31	33	141	200	12	184
From escape,	1	—	2	10	13	10	—	1	—	3
Nominally for discharge,	3	52	27	44	40	4	2	1	9	5
Whole number of cases within the year,	1,677	1,407	1,057	1,962	1,370	1,096	687	906	1,575	445
Dismissed within the year,										
Men,	591	407	287	740	466	388	123	66	89	42
Women,	279	260	156	418	188	168	84	29	26	34
Viz.: Discharged,	312	198	131	322	278	220	84	37	63	8
Men,	196	163	119	203	150	127	21	—	11	7
Women,	111	99	62	101	75	49	8	—	3	7
Recovered,	85	64	57	102	75	78	13	4	8	2
Men,	76	30	29	46	55	30	7	—	—	2
Women,	44	14	14	31	21	9	2	—	—	2
Capable of self-support,	32	16	15	31	21	21	5	—	—	3
Improved,	38	30	32	40	34	3	1	—	4	1
Not improved,	32	72	37	54	25	49	8	3	6	1
Not insane,	44	29	20	61	46	44	5	1	1	—
	6	2	1	2	—	1	—	—	—	—

ADMISSIONS, DISCHARGES, ETC.

Died,	136	106	73	174	92	126	65	53	73	6
Men,	70	68	45	94	50	55	22	22	21	6
Women,	66	38	28	80	42	71	28	31	52	6
Transferred,	194	97	56	212	93	49	28	4	4	20
On escape Sept. 30, 1906,	9	2	3	10	7	5	4	5	6	6
On visit Sept. 30, 1906,	56	99	36	141	124	81	5	—	1	3
Remaining Sept. 30, 1906,										
Men,	1,086	940	770	1,222	904	708	564	840	1,486	403
Women,	573	408	393	533	380	301	182	362	534	278
Supported by the State,	513	442	377	689	515	407	382	478	932	125
Reimbursing,										
Private,	849	781	607	975	673	591	562	813	1,435	397
Daily average number,										
State,	1,153.07	936.90	766.10	1,201.27	878.21	701.44	538.94	755.85	1,323.21	323.65
Reimbursing,	927.72	792.32	609.35	1,070.36	685.63	591.78	538.40	728.69	1,469.15	316.50
Private,	71.33	63.58	50.05	98.76	60.24	14.83	.54	27.16	54.06	7.15
	154.02	81.00	106.70	122.15	132.34	94.83	—	—	—	—
Persons first admitted to any insane hospital,										
Men,	348	331	198	406	307	250	62	—	—	—
Women,	203	194	106	216	140	102	31	—	—	—
Recent (insane less than one year),	145	137	92	190	167	148	31	—	—	—
Chronic (insane one year or more),	171	158	88	173	166	117	23	—	—	—
Unknown,	136	121	104	206	87	96	35	—	—	—
	41	52	6	27	54	37	4	—	—	—
Persons admitted by commitment,										
Viz.: From cities and large towns,	433	427	253	517	394	296	68	—	—	—
From country districts,	346	299	134	421	263	292	59	—	—	—
Unknown,	87	128	119	96	131	4	9	—	—	—
	—	—	—	—	—	—	—	—	—	—
Whole number of persons within the year,	1,642	1,349	1,028	1,901	1,318	1,037	685	905	1,566	439
Whole number of persons admitted within the year,	457	448	259	554	439	343	210	201	12	186
Persons recovered within the year,	76	30	29	46	55	30	7	—	—	2

1 One patient reported as insane Sept. 30, 1905, now regarded as an habitual drunkard, and not included here.

ADMISSIONS, DISCHARGES, ETC.

TABLE XII. — *Admissions, Discharges, etc., of the Insane in Institutions and boarded in Private Families for the Year ending Sept. 30, 1906 — Concluded.*

	Hospital for Epileptics.	Asylum for Insane Criminals.	Foxborough State Hospital.	Total.	Family Care.	Total Public.	McLean Hospital.	Other Private Hospitals.	Total Private Institutions.	Totals for the State.
Remaining Sept. 30, 1905,										
Men,	281	523	50	9,654 ¹	253	9,907	179	66	245	10,152 ¹
Women,	141	523	50	4,727	241	5,108	81	12	93	4,832
	140	—	—	4,927	—	—	98	54	152	5,320
Admitted within the year,										
Men,	45	97	85	3,569	97	3,706	144	60	204	3,910
Women,	27	97	85	1,845	6	1,851	98	14	112	1,963
By commitment,	18	—	—	1,764	91	1,855	46	46	92	1,947
Men,	35	88	—	2,520	—	2,520	120	54	174	2,694
Women,	20	88	—	1,337	—	1,337	80	14	94	1,431
By transfer,	15	—	—	1,183	—	1,183	40	40	80	1,263
From visit,	2	—	85	749	93	842	6	6	12	854
From escape,	3	—	—	45	—	45	2	—	2	47
Nominally for discharge,	1	9	—	22	3	23	16	—	—	23
	4	—	—	273	—	276	—	—	16	292
Whole number of cases within the year,	326	620	135	13,263	350	13,613	323	126	449	14,062
Dismissed within the year,										
Men,	59	96	23	3,437	65	3,502	140	49	189	3,691
Women,	21	96	23	1,746	5	1,751	90	14	104	1,855
Viz.: Discharged,	38	—	—	1,691	60	1,751	50	35	85	1,836
Men,	5	58	2	1,070	9	1,079	96	33	129	1,208
Women,	5	58	2	580	1	581	58	5	63	644
Recovered,	4	—	—	490	8	498	38	28	66	564
Men,	—	—	—	296	3	299	38	16	54	353
Women,	—	21	—	158	—	158	20	2	22	180
Men,	—	21	—	138	3	141	18	14	32	173
Women,	—	—	—	191	6	197	18	—	18	215
Capable of self-support,	1	14	—	300	—	300	24	7	31	331
Improved,	7	5	2	191	—	197	24	9	33	257
Not improved,	1	9	—	262	—	262	16	9	25	287
Not insane,	—	—	—	21	—	21	—	1	1	22

ADMISSIONS, DISCHARGES, ETC.

Died,	17	23	13	957	6	963	17	9	26	989
Men,	10	23	13	499	2	501	15	6	21	522
Women,	7	—	—	458	4	462	2	3	5	467
Transferred,	28	2	8	795	41	836	14	4	18	854
On escape Sept. 30, 1906,	—	2	—	53	2	55	—	—	—	55
On visit Sept. 30, 1906,	5	11	—	562	7	569	13	3	16	585
Remaining Sept. 30, 1906,										
Men,	267	524	112	9,826	285	10,111	183	77	290	10,371
Women,	147	524	112	4,826	13	4,839	89	12	101	4,940
Supported by the State,	120	—	—	5,000	272	5,272	94	65	159	5,431
Reimbursing,										
Private,	282	524	111	8,570	242	8,812	—	—	—	8,812
	8	—	1	532	5	537	—	—	—	537
	7	—	—	724	38 ²	762	183	77	260	1,022
Daily average number,	274.13	540	70.31	9,753.08	247.98	10,001.06	184.85	69.28	254.13	10,255.19
State,	259.73	540	70.31	8,599.94	212.64	8,812.58	—	—	—	8,812.58
Reimbursing,	6.99	—	—	454.09	3.31	458.00	—	—	—	458.00
Private,	7.41	—	—	698.45	32.03	730.48	184.85	69.28	254.13	984.61
Persons first admitted to any insane hospital, ¹										
Men,	16	72	—	1,990	—	1,990	87	43	130	2,120
Women,	8	72	—	1,072	—	1,072	59	13	72	1,144
Recent (insane less than one year),	8	—	—	918	—	918	28	30	58	976
Chronic (insane one year or more),	11	36	—	943	—	943	58	36	94	1,037
Unknown,	2	25	—	812	—	812	29	7	36	848
	3	11	—	235	—	235	—	—	—	235
Persons admitted by commitment,										
Viz.: From cities and large towns,	35	87	—	2,506	—	2,506	120	54	174	2,676
From country districts,	12	67	—	1,889	—	1,889	91	43	134	2,020
Unknown,	23	20	—	617	—	617	29	11	40	656
	—	—	—	—	—	—	—	—	—	—
Whole number of persons within the year,	318	610	135	12,236 ³	333	12,444	307	125	425	12,843 ³
Whole number of persons admitted within the year,	40	87	85	2,573 ³	92	2,574	128	60	173	2,746 ³
Persons recovered within the year,	—	21	—	296	3	299	37	16	53	352

¹ One patient reported as insane Sept. 30, 1905, now regarded as an habitual drunkard, and not included here.² Includes 15 patients self-supporting and 6 living with friends without public aid.³ Nominal admissions not included.

FORMS OF MENTAL DISEASE, ETC.

TABLE XIII. — *Forms of Mental Disease in Patients committed, discharged or who died at Public Institutions for the Insane and McLean Hospital.*

	COMMITMENTS.								DISCHARGES — RECOVERED AND CAPABLE OF SELF-SUPPORT.								
	Worcester Hospital.	Taunton Hospital.	Northampton Hospital.	Danvers Hospital.	Westborough Hospital.	Boston Insane Hospital.	McLean Hospital.	Other Institutions.	Total Commitments.	WORCESTER HOSPITAL.		TAUNTON HOSPITAL.		NORTHAMPTON HOSPITAL.		DANVERS HOSPITAL.	
										Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.
First admitted to any hospital: —																	
A. — Most curable: —																	
Mania, acute.	37	18	17	40	20	2	37	7	202	14	1	4	1	10	8		
Manic-depressive insanity,								5	5								
Periodic insanity,								1	1								
Insanity of pregnancy,									6								
Confusional insanity,									3								
Hysterical insanity,		1		3	6			2	15								
Neurasthenia,	24	20	15	43	24	9	4	2	141	31		11	6	8	4		
Alcoholic insanity, acute,		1	2	5	1		3	5	17					2	4		
Toxic insanity, acute,	14	2	1	8			2		25	11		1		1	1		
Delirium, acute,							1		2								
Delirium with somatic disease,									1								
Psychosis with somatic disease,									1								
Total A,	76	46	35	99	53	43	47	22	421	57	1	17	7	20	4	36	14
B. — Less curable: —																	
Mania, chronic,																	
Melancholia, chronic,																	
Involution, psychosis,	12	14	15	8	17	23	1	2	92	1	1				1		
Chorea insanity,				1					2								
Psychopathic inferiority,	11	15		4		3		1	34		3		2				
Traumatic insanity,	4								1	1	2						
Myxoedematous insanity,									1								
Alcoholic insanity, chronic,	32	17	13	19	20	14		17	132		11						3
Toxic insanity, chronic,	1				2			6	9						1		1

FORMS OF MENTAL DISEASE, ETC.

Korsakow's psychosis,
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FORMS OF MENTAL DISEASE, ETC.

TABLE XIII. — *Forms of Mental Disease in Patients committed, discharged or who died at Public Institutions for the Insane and McLean Hospital — Continued.*

	COMMITMENTS.								DISCHARGES — RECOVERED AND CAPABLE OF SELF-SUPPORT.								
	Worcester Hospital.	Taunton Hospital.	Northampton Hospital.	Danvers Hospital.	Westborough Hospital.	Boston Insane Hospital.	McLean Hospital.	Other Institutions.	Total Commitments.	WORCESTER HOSPITAL.		TAUNTON HOSPITAL.		NORTHAMPTON HOSPITAL.		DANVERS HOSPITAL.	
										Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.
Other admissions — <i>Concluded.</i>	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B. — Less curable : —																	
Mania, chronic,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Melancholia, chronic,	5	8	4	—	3	2	1	—	23	—	—	—	—	—	—	—	—
Involution psychosis,	2	2	—	—	—	—	—	—	7	—	—	—	—	—	—	—	—
Psychopathic inferiority,	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—
Traumatic insanity,	7	7	1	10	6	6	—	7	44	—	—	—	—	—	—	—	—
Alcoholic insanity, chronic,	1	—	—	—	—	—	—	2	3	—	—	—	—	—	—	—	—
Toxic insanity, chronic,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Korsakow's psychosis,	23	22	9	33	31	21	2	3	144	1	1	—	—	—	—	—	—
Dementia praecox,	—	—	1	1	2	1	1	—	3	—	—	—	—	—	—	—	—
Dementia secondary,	—	1	1	1	7	1	1	—	11	—	—	—	—	—	—	—	—
Paranoia,	6	6	—	—	—	—	—	—	13	—	—	—	—	—	—	—	—
Paranoid condition,	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—
Obsessional insanity,	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—
Delusional insanity,	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—
Total B,	44	46	17	48	49	30	4	13	251	1	1	—	4	—	4	—	2
Total A, B,	70	81	39	97	72	41	25	17	442	16	2	12	9	9	9	10	9
C. — Most incurable : —																	
General paralysis,	6	5	1	8	6	3	2	—	31	—	—	—	—	—	—	—	—
Coarse brain lesions,	1	2	1	—	—	—	—	—	6	—	—	—	—	—	—	—	—
Epileptic insanity,	2	5	1	4	2	2	—	21	37	—	—	—	—	—	—	—	—

FORMS OF MENTAL DISEASE, ETC.

TABLE XIII. — *Forms of Mental Disease in Patients committed, discharged or who died at Public Institutions for the Insane and McLean Hospital — Continued.*

	DISCHARGES — RECOVERED AND CAPABLE OF SELF-SUPPORT — CON.								TOTAL DISCHARGES.					Died.	Aggregate Deaths.	Discharges and Deaths.
	WEST-BOROUGH HOSPITAL.		BOSTON INSANE HOSPITAL.		MCLEAN HOSPITAL.		OTHER INSTITUTIONS.		Recovered.	Capable of Self-support.	Improved.	Not Improved.	Total Discharges.			
	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.								
A. — Most curable: — Mania, acute, Manic-depressive insanity, Periodic insanity, . . . Insanity of pregnancy, Confusional insanity, Hysterical insanity, Neurasthenia, . . . Alcoholic insanity, acute, Toxic insanity, acute, Delirium, acute, Delirium with somatic disease, Psychosis with somatic disease,	22	1	17	—	14	6	—	—	—	90	21	34	17	162	1	190
	—	—	—	—	—	—	—	3	1	3	1	—	—	5	2	7
	—	—	—	—	—	—	—	—	—	5	—	3	—	8	5	13
	—	—	5	—	—	—	—	—	—	1	1	2	4	5	4	9
	1	—	—	—	—	—	—	2	—	1	11	2	1	110	3	113
	10	—	2	—	2	1	—	8	—	96	12	13	1	13	29	145
	—	—	—	—	—	—	—	6	—	13	1	—	—	2	1	6
	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1
	—	—	—	—	—	—	—	—	—	13	—	—	—	—	—	1
	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1
	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
	Total A.	34	1	24	—	20	7	—	19	1	227	35	41	20	323	59	382
B. — Less curable: — Mania, chronic, Melancholia, chronic, Involution psychosis, Choreic insanity, Psychopathic inferiority, Traumatic insanity, Myxoedematous insanity, Alcoholic insanity, chronic, Toxic insanity, chronic,	—	—	—	—	—	—	—	—	1	—	1	1	—	2	—	2
	3	2	—	—	—	—	—	1	—	5	4	14	12	35	5	59
	—	—	—	—	—	—	—	—	—	—	—	1	4	15	—	15
	—	—	—	—	—	—	—	—	—	—	6	4	—	4	—	4
	—	—	—	—	—	—	—	—	—	1	3	—	—	—	—	2
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
	—	—	—	—	—	—	—	—	—	1	27	14	12	54	10	64
	—	3	—	—	—	—	—	—	4	1	—	—	1	1	4	5

FORMS OF MENTAL DISEASE, ETC.

TABLE XIII. — *Forms of Mental Disease in Patients committed, discharged or who died at Public Institutions for the Insane and McLean Hospital — Concluded.*

	DISCHARGES — RECOVERED AND CAPABLE OF SELF-SUPPORT — CON.								TOTAL DISCHARGES.					Died.	Aggregate Deaths, Discharges and						
	WEST-BOROUGH HOSPITAL.		BOSTON INSANE HOSPITAL.		MCLEAN HOSPITAL.		OTHER INSTITUTIONS.		Recovered.	Capable of Self-support.	Improved.	Not improved.	Total Discharges.								
	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.	Recovered.	Capable of Self-support.													
Other admissions — <i>Concluded.</i> B. — Less curable : — Mania, chronic, Melancholia, chronic, Involution psychosis, Psychopathic inferiority, Traumatic insanity, Alcoholic insanity, chronic, Toxic insanity, chronic, Korsakow's psychosis, Dementia precox, Dementia secondary, Paranoia, Paranoid condition, Obsessional insanity, Delusional insanity, Total B, Total A, B,																					
	C. — Most incurable : — General paralysis, Coarse brain lesions, Epileptic insanity,																				

PROBABLE CAUSES OF MENTAL DISEASE, ETC.

TABLE XIV. — *Probable Causes of Mental Disease in Persons admitted to Public Institutions for the Insane and McLean Hospital who were received for the First Time at Any Hospital.*

PROBABLE CAUSES.	FIRST ADMITTED.		PREDISPOSING CAUSES.								
	Men.	Women.	HEREDITARY TENDENCY.			NEUROTIC TENDENCY.		ALCOHOLIC INTEMPERANCE.			
			Men.	Women.	Totals.	Men.	Women.	Totals.			
A. — Physical : —											
Age and loss of sight,	1	—	1	—	—	—	17	2	184	48	232
Alcoholic intemperance,	269	65	334	13	9	4	40	13	5	2	7
Arterio-sclerosis,	28	20	48	—	—	—	—	—	—	—	—
Bronchitis and disease of middle ear,	1	1	2	—	—	—	—	—	—	—	—
Cerebral hemorrhage,	18	18	36	1	1	—	1	6	2	1	3
Childbearing,	—	32	32	—	—	6	—	—	—	1	1
Cardiac disease,	1	—	1	—	—	—	—	—	—	—	—
Chorea,	1	—	1	—	—	1	—	—	—	—	—
Coarse brain lesions,	1	1	2	—	—	—	—	—	—	—	—
Congenital,	58	35	93	12	13	25	25	2	6	6	6
Congenital and cerebral hemorrhage,	—	1	1	—	—	—	—	—	—	—	—
Consanguinity,	2	1	3	—	1	1	1	—	1	1	1
Dissipation,	5	4	9	—	—	—	—	—	—	—	—
Drug habit,	9	5	14	3	1	4	4	2	2	2	2
Endocarditis,	1	—	1	—	—	—	—	—	—	—	—
Epilepsy,	15	16	31	6	6	11	11	5	1	1	1
Heredity,	87	114	201	87	114	201	87	2	20	3	23
Hydrocephalus,	—	—	—	—	—	—	—	1	—	—	—
Immorality,	1	1	2	—	—	—	—	—	—	—	—
Infantile hemiplegia,	—	1	1	—	—	—	—	—	—	—	—
Infectious disease,	1	—	1	—	—	—	—	—	—	—	—
Lead poisoning,	2	—	2	—	—	—	—	—	—	—	—
La grippe,	1	—	1	—	—	—	—	—	—	—	—
Menopause,	—	45	45	—	—	—	—	—	—	—	—
Meningitis, cerebro-spinal,	—	1	1	—	—	11	—	—	2	1	3
Myxedema,	—	1	1	—	—	—	—	—	—	—	—
Operation, surgical,	—	3	3	—	—	—	—	—	—	—	—
Overwork,	17	8	25	4	1	5	5	1	4	5	1
Senility,	147	154	301	18	9	27	27	10	14	24	22
Somatic disease,	23	38	61	5	13	18	18	5	8	13	6

PROBABLE CAUSES OF MENTAL DISEASE, ETC.

Syphilis,	78	10	88	11	1	12	7	—	7	24	1	25
Sunstroke,	—	1	1	—	1	1	—	—	—	—	—	—
Tobacco,	2	—	2	—	—	—	—	—	—	1	—	1
Traumatism,	15	5	20	4	1	5	3	2	5	3	1	4
Tuberculosis,	1	1	2	—	—	—	—	—	—	—	—	—
Typhoid fever,	—	1	1	—	—	—	—	—	—	—	1	1
Total physical,	775	581	1,356	202	193	395	57	54	111	275	66	341
B. — Mental : —												
Disappointment,	—	2	2	—	—	—	—	—	—	—	—	—
Domestic trouble,	3	2	5	—	1	1	—	1	1	—	—	—
Fright,	—	4	4	—	1	1	—	2	2	—	—	—
Grief,	4	16	20	1	4	5	1	4	5	—	—	—
Overstudy,	—	2	2	—	1	1	—	1	1	—	—	—
Overwork,	9	3	12	4	1	5	1	1	2	—	—	—
Worry, grief,	29	39	68	7	11	18	10	15	25	3	1	4
Worry and overwork,	4	15	19	1	3	4	—	3	3	1	—	1
Total mental,	49	83	132	13	22	35	12	27	39	4	1	5
Totals,	824	664	1,488	215	215	430	69	81	150	279	67	346
Unknown,	307	282	589	22	28	50	28	23	51	2	—	2
Totals,	1,131	946	2,077	237	243	480	97	104	201	281	67	348

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

TABLE XV. — *Causes of Death and Form of Mental Disease in Persons who died at Public Institutions for the Insane and McLean Hospital — Continued.*

CAUSES.	AGGREGATES.			MANIC-DEPRESSIVE INSANITY.			PERIODIC INSANITY.			CON-FUSIONAL INSANITY.			HYSTERICAL INSANITY.			ALCOHOLIC INSANITY.			TOXIC INSANITY.		
	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.
Genito-urinary — <i>Concluded.</i>																					
Nephritis, chronic.	3	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, acute hemorrhagic, myocarditis and lepto-meningitis.	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-
Nephritis, chronic diffuse.	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, chronic interstitial.	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, chronic interstitial, and general arterio-sclerosis.	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Nephritis, chronic interstitial, and chronic interstitial myocarditis.	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, pyelo.	3	1	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pyelitis.	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pyelocystitis.	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Uremic convulsions.	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Violence, accidental injuries, etc.: —																					
Asphyxiation from food.	2	1	3	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
Bullet wound of head, suicide.	-	1	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Fracture of femur.	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Fracture of cervical vertebra (myelitis).	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
Suicide by hanging.	2	-	2	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Suicide by strangulation.	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Traumatic shock and hemorrhage.	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ill defined: —																					
Exhaustion from excitement.	2	1	3	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Exhaustion from heat.	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Inanition.	3	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals.	514	460	974	22	30	52	1	2	3	3	3	6	-	1	1	12	5	17	5	2	7

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

TABLE XV. — *Causes of Mental Disease in Persons who died at Public Institutions for the Insane and McLean Hospital — Continued.*

[illegible]

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

[illegible]

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

TABLE NV. — *Causes of Death and Form of Mental Disease in Persons who died at Public Institutions for the Insane and McLean Hospital — Continued.*

[illegible]

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

TABLE XV. — *Causes of Death and Form of Mental Disease in Persons who died at Public Institutions for the Insane and McLean Hospital — Continued.*

CAUSES.	NEURASTHENIA.			DEMENTIA PRÆCOX.			DEMENTIA SECONDARY.			INVOLUTION PSYCHOSIS.			PARANOIA.			PARANOID CONDITION.			DELUSIONAL INSANITY.		
	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.
Genito-urinary — <i>Concluded.</i>																					
Nephritis, chronic,	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-
Nephritis, acute hemorrhagic, myocarditis and leptomeni-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
gitis,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, chronic diffuse,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, chronic interstitial,	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-
Nephritis, chronic interstitial, and general arterio-sclerosis,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, chronic interstitial, and chronic interstitial	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
myocarditis,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nephritis, pyelo,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pyelitis,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pyelocystitis,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Uremic convulsions,	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Violence, accidental injuries, etc.: —																					
Asphyxiation from food,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Bullet wound of head, suicide,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Fracture of femur,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Fracture of cervical vertebra (myelitis),	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Suicide by hanging,	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Suicide by strangulation,	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Traumatic shock and hemorrhage,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ill defined: —																					
Exhaustion from excitement,	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Exhaustion from heat,	-	-	-	-	-	-	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-
Inanition,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals,	-	4	4	61	67	128	21	47	68	7	19	26	3	12	15	2	6	8	4	2	6

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

TABLE XV. — *Causes of Death and Form of Mental Disease in Persons who died at Public Institutions for the Insane and McLean Hospital — Continued.*

CAUSES.	GENERAL PARALYSIS.			COARSE BRAIN LESIONS.			EPILEPTIC INSANITY.			IMBECILITY.			SENILE INSANITY.			UNDIAGNOSTICATED.		
	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.
General : —																		
Abscesses, multiple.	.	.	.	1		1												
Acute yellow atrophy of the liver.	.	.	.															
Anæmia.	.	.	.															
Anæmia, pernicious.	.	.	.															
Anæmia, pernicious, and entero-colitis.	.	.	.															
Arthritis, chronic rheumatic.	.	.	.															
Carcinoma of abdominal viscera.	.	.	.															
Carcinoma of breast.	.	.	.															
Carcinoma of inferior maxilla.	.	.	.															
Carcinoma of kidney.	.	.	.															
Carcinoma of gall bladder.	.	.	.															
Carcinoma of tongue.	.	.	.															
Diabetes.	.	.	.															
Dyssipelas.	.	.	.	1	1								3	1	4	1		
Erysipelas, facial.	.	.	.										1		1			
Exhaustion from multilocular ovarian cyst.	.	.	.				1	1					2	1	3			
Gangrene of foot.	.	.	.															
Gangrene of leg.	.	.	.															
Malarial fever and acute enteritis.	.	.	.															
Parotitis.	.	.	.															
Peritonitis, acute.	.	.	.	1	1													
Peritonitis, perforating.	.	.	.															
Rupture of urethra.	.	.	.															
Sarcoma of jaw.	.	.	.	7	1	8							1		1			
Septicæmia.	.	.	.										2	2	4			
Senile debility, chronic prostatitis.	.	.	.															
Septic cellulitis of neck.	.	.	.										1	1	1			
Streptococcus stomatitis.	.	.	.															
Tuberculosis, miliary acute.	.	.	.															
Tuberculosis, general.	.	.	.															
Tuberculosis, general, and pleurisy with effusion.	.	.	.	1	1	2				2	1	3	2	1	1			
Tuberculosis, spinal, lumbar abscess.	.	.	.															
Typhoid fever.	.	.	.										1		1			

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

TABLE XV. — *Causes of Death and Form of Mental Disease in Persons who died at Public Institutions for the Insane and McLean Hospital — Continued.*

CAUSES.	GENERAL PARALYSES.			COARSE BRAIN LESIONS.			EPILEPTIC INSANITY.			IMBECLITY.			SENILE INSANITY.			UNDAEMONOSTICATED.		
	M.		T.	M.		T.	M.		T.	M.		T.	M.		T.	M.		T.
	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.	M.	W.	T.
Nervous: —																		
Brain tumor,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebral thrombosis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebral thrombosis, hypostatic pneumonia,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebral thrombosis, paralysis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebral syphilis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Coarse brain lesions,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chorea, Huntington's,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Confusional insanity, acute,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Delirium, acute,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Delusional insanity, chronic,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Delusional insanity, chronic,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dementia precox,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dementia, secondary,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Epilepsy,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Epilepsy and pulmonary oedema,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Status epilepticus,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Exhaustion psychosis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Exhaustion psychosis and acute mania,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
General paralysis,	92	31	123	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hemorrhagic pachymeningitis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hemorrhage beneath tentorium cerebelli,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Involution psychosis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Mania, acute delirious,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Mania, chronic,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Manic-depressive insanity,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Melancholia, chronic,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningitis, basilar,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningitis, cerebro-spinal,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningitis, tuberculous,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pachymeningitis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pachymeningitis hemorrhagica interna,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pachymeningitis hemorrhagica interna and oedema of lungs,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Senile insanity,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Syphilitic meningio, encephalitis,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

CAUSES OF DEATH AND FORM OF MENTAL DISEASE, ETC.

Circulatory :—
Acute dilatation of heart,
Anæmia, progressive,
Aortic aneurism,
Anasarca from cardiac and renal disease,
Aortic insufficiency,
Aortic stenosis,
Apoplexy, cerebral,
Arterio-sclerosis,
Arterio-sclerosis, chronic nephritis,
Arterio-sclerosis and aortic stenosis,
Convulsions, cerebral,
Embolism, cerebral,
Endocarditis,
Hemorrhage, cerebral,
Hemorrhage, cerebral, and acute cystitis,
Hemorrhage, cerebral, embolism,
Hemorrhage, cerebral, and chronic nephritis,
Hemorrhage, cerebral, and arterio-sclerosis,
Femoral thrombosis,
Mitral insufficiency,
Mitral regurgitation,
Mitral sclerosis, hypertrophy, and dilatation of heart,
Myocarditis and pericarditis with effusion,
Myocarditis,
Myocarditis, fatty,
Myocarditis, fatty, general œdema,
Myocarditis, acute, and endocarditis, acute,
Myocarditis with acute dilatation,
Pericarditis,
Rupture of heart,
Thrombosis of aorta,
Thrombosis, multiple,
Thrombi of heart, multiple,
Thrombosis,
Valvular heart disease,
Respiratory : —
Bronchitis, capillary,
Congestion and œdema of lung,
Empyema,
Gangrene of lungs,
Pleurisy with effusion,
Pneumonia, broncho,
Pneumonia, bronchio, and chronic diffuse nephritis,

DURATION OF MENTAL DISEASE, ETC.

TABLE XVI. — Duration of Mental Disease and its Treatment in Persons who recovered or died at Public Institutions for the Insane and McLean Hospital.

PERIOD.	FIRST ADMITTED TO ANY HOSPITAL.						ALL OTHER ADMISSIONS.					
	DURATION BEFORE ADMISSION.			HOSPITAL RESIDENCE.			WHOLE DURATION.			WHOLE KNOWN PERIOD OF MENTAL DISEASE.		
	Men.	Women.	Totals.	Men.	Women.	Totals.	Men.	Women.	Totals.	Men.	Women.	Totals.
A. — Recovered : —												
Under 1 month,	72	43	115	15	10	25	9	4	13	1	1	1
From 1 to 3 months,	27	30	57	58	29	87	29	18	47	2	3	6
3 to 6 months,	12	17	29	22	27	49	36	22	58	5	2	7
6 to 12 months,	10	9	19	26	32	58	24	39	63	13	12	25
1 to 2 years,	4	4	8	11	8	19	20	13	33	10	9	19
2 to 5 years,	5	2	7	4	4	8	11	8	19	9	12	21
5 to 10 years,	3	—	3	1	1	2	4	1	5	2	4	3
10 to 20 years,	—	—	—	—	—	—	—	—	—	—	—	—
Over 20 years,	—	—	—	—	—	—	—	—	—	—	—	—
Totals,	133	165	298	137	111	248	133	105	238	37	45	85
Unknown,	4	6	10	—	—	—	4	6	10	4	1	1
Totals,	137	111	248	137	111	248	137	111	248	41	45	86
Average of known cases (in months),	5.73	2.65	4.37	5.66	7.06	6.29	10.82	9.91	10.42	33.69	17.53	20.61

NATIVITY AND PARENTAGE OF INSANE PERSONS, ETC.

TABLE XVII. — *Nativity and Parentage of Insane Persons admitted to Public Institutions for the Insane and McLean Hospital, who were received for the First Time at Any Hospital.*

PLACES OF NATIVITY.	1906.											
	MALES.			FEMALES.			TOTALS.			THREE YEARS, 1904-1906.		
	Patients.	Fathers.	Mothers.	Patients.	Fathers.	Mothers.	Patients.	Fathers.	Mothers.	Patients.	Fathers.	Mothers.
Massachusetts,	423	171	181	347	153	166	770	324	347	2,532	1,058	1,081
Other New England States,	131	122	117	81	103	93	212	225	210	689	689	661
Other States,	68	42	47	57	33	33	125	75	80	395	255	261
Total native,	622	335	345	485	289	292	1,107	624	637	3,616	2,002	2,003
Other countries : —												
Africa,	1	1	1	1	1	1	1	1	1	1	1	1
Armenia,	2	2	2	1	1	1	2	2	2	9	8	7
Australia,	1	1	1	1	1	1	1	1	1	1	1	1
Austria,	10	9	8	5	5	5	15	14	13	42	37	35
Azores,	8	10	11	4	6	5	12	16	16	29	38	34
Barbadoes Islands,	1	1	1	1	1	1	1	1	1	2	2	3
Belgium,	1	1	1	1	1	1	1	1	1	3	3	3
Bohemia,	1	1	1	1	1	1	1	1	1	1	1	1
Bulgaria,	1	1	1	1	1	1	1	1	1	1	1	1
Canada,	117	129	130	99	106	108	216	235	238	674	651	696

NATIVITY AND PARENTAGE OF INSANE PERSONS, ETC.

[illegible]

NATIVITY AND PARENTAGE OF INSANE PERSONS, ETC.

TABLE XVII. — *Nativity and Parentage of Insane Persons admitted to Public Institutions for the Insane and McLean Hospital, who were received for the First Time at Any Hospital — Concluded.*

PLACES OF NATIVITY.	1906.											
	MALES.			FEMALES.			TOTALS.			THREE YEARS, 1904-1906.		
	Patients.	Fathers.	Mothers.	Patients.	Fathers.	Mothers.	Patients.	Fathers.	Mothers.	Patients.	Fathers.	Mothers.
Sweden,	27	29	27	17	17	17	44	46	44	125	136	134
Switzerland,	1	3	1	1	1	2	2	4	3	3	7	6
Syria,	1	-	-	-	-	-	1	-	-	6	4	4
Turkey,	8	7	7	1	1	1	9	8	8	15	13	14
Wales,	1	2	2	-	-	-	1	2	2	4	5	3
West Indies,	3	2	1	1	-	1	4	2	2	13	11	10
Total foreign,	497	726	711	456	615	610	953	1,341	1,321	3,007	4,049	4,021
Unknown,	12	70	75	5	42	44	17	112	119	88	660	687
Totals,	1,131	1,131	1,131	946	946	946	2,077	2,077	2,077	6,711	6,711	6,711

CIVIL CONDITION OF INSANE PERSONS, ETC.

TABLE XVIII. — *Civil Condition of Insane Persons admitted to Public Institutions for the Insane and McLean Hospital, who were received for the First Time at Any Hospital.*

CIVIL CONDITION.	1906.			THREE YEARS, 1904-1906.		
	Men.	Women.	Totals.	Men.	Women.	Totals.
Unmarried,	511	370	881	1,645	1,192	2,837
Married,	480	373	853	1,522	1,180	2,702
Widowed,	119	189	308	358	641	999
Divorced,	12	11	23	41	38	79
Unknown,	9	3	12	59	35	94
Totals,	1,131	946	2,077	3,625	3,086	6,711

TABLE XIX. — *Occupations of Insane Persons admitted to Public Institutions for the Insane and McLean Hospital, who were received for the First Time at Any Hospital.*

OCCUPATIONS.	1906.			THREE YEARS, 1904-1906.		
	Men.	Women.	Totals.	Men.	Women.	Totals.
Educated or professional, .	30	31	61	140	101	241
Domestic,	11	150	161	55	555	610
Farmers,	51	-	51	176	-	176
Housekeepers,	-	429	429	-	1,078	1,078
Laborers,	243	-	243	807	-	807
Mechanical,	239	6	245	736	16	752
Operatives,	96	75	171	343	220	563
Traders,	153	41	194	506	122	628
Miscellaneous,	196	25	221	378	61	439
Totals,	1,019	757	1,776	3,141	2,153	5,294
No occupation,	103	180	283	413	855	1,268
Unknown,	9	9	18	71	78	149
Totals,	1,131	946	2,077	3,625	3,086	6,711

MEMBERS OF THE STATE BOARD OF INSANITY.

MEMBERS OF THE STATE BOARD OF INSANITY.

Date of Original Appointment.	Name.	Residence.	Term expires.	Return.	
				Date.	Reason.
September, 1898, .	George F. Jelly, M.D., .	Boston, .	September, 1908, .	—	—
September, 1898, .	Herbert B. Howard, M.D., .	Boston, .	—	January, 1902, .	Resigned.
September, 1898, .	Charles R. Codman, .	Barnstable, .	September, 1906, .	September, 1906, .	Term expired.
September, 1898, .	Edward S. Bradford, .	Springfield, .	—	February, 1900, .	Resigned.
September, 1898, .	Francis B. Gardner, .	Brockton, .	—	February, 1902, .	Resigned.
February, 1900, .	Albert L. Harwood, .	Newton Centre, .	September, 1905, .	September, 1905, .	Term expired.
January, 1902, .	James B. Ayer, M.D., .	Boston, .	September, 1907, .	—	—
December, 1902, .	Seward W. Jones, .	Newton Highlands, .	September, 1909, .	—	—
September, 1905, .	Michael J. O'Meara, M.D., .	Worcester, .	September, 1910, .	—	—
October, 1906, .	Henry P. Field, .	Northampton, .	September, 1911, .	—	—

DIRECTORY OF INSTITUTIONS.

WORCESTER INSANE HOSPITAL (opened 1833) :—

Trustees : George F. Blake, Worcester, chairman ; Samuel B. Woodward, M.D., Worcester, secretary ; Lyman A. Ely, Worcester ; T. Hovey Gage, Worcester ; Miss Frances M. Lincoln, Worcester ; Thomas Russell, Boston ; Mrs. Sarah E. Whitin, Whitinsville.

Regular meeting, first Tuesday of each month.

Superintendent, Hosea M. Quinby, M.D.

First assistant physician, Theodore A. Hoch, M.D.

Assistant physicians, Cornelia B. J. Schorer, M.D. ; Edward Mellus, M.D. ; Robert O. LeBaron, M.D., Ray L. Whitney, M.D., Mason W. H. Pitman, M.D.

Assistant physician and pathologist, Freeman A. Tower, M.D.

Treasurer, Albert Wood.

Steward, Henry R. Center.

Visiting days, Wednesdays and Fridays.

TAUNTON INSANE HOSPITAL (opened 1854) :—

Trustees : Nathaniel B. Borden, Fall River, chairman ; Mrs. Elizabeth C. M. Gifford, East Boston, secretary ; Loyed E. Chamberlain, Brockton ; James P. Francis, New Bedford ; Mrs. Susan E. Learoyd, Wakefield ; William C. Lovering, Taunton ; Henry R. Stedman, M.D., Brookline.

Regular meeting, second Thursday of each month.

Superintendent, Arthur V. Goss, M.D.

Assistant physicians, Benjamin W. Baker, M.D., Florence H. Abbot, M.D., Horace G. Ripley, M.D., George K. Butterfield, M.D.

Assistant physician and pathologist, Harry W. Miller, M.D.

Assistant pathologist, Dora W. Faxon, M.D.

Treasurer, Frank W. Boynton.

Steward, Otis E. White.

Visiting days, Wednesdays and Saturdays and all legal holidays.

NORTHAMPTON STATE HOSPITAL (opened 1858) :—

Trustees : Alvan Barrus, Goshen, chairman ; Henry L. Williams, Northampton, secretary ; F. W. Chapin, M.D., Springfield ; William D. MacInnes, Pittsfield ; Chas. S. Shattuck, Hatfield ; Mrs. Sarah A. Woodworth, Chicopee ; Miss Caroline A. Yale, Northampton.

NORTHAMPTON STATE HOSPITAL (opened 1858) — *Concluded.*

Regular meeting, first Thursday of each month.

Superintendent, John A. Houston, M.D.

Assistant physicians, Harriet M. Wiley, M.D., Charles H. Dean, M.D., Grace E. B. Rice, M.D., Edward W. Whitney, M.D., C. Stanley Raymond, M.D.

Treasurer, Lewis F. Babbitt.

Visiting days, Tuesdays and Fridays.

DANVERS INSANE HOSPITAL (opened 1878) :—

Post-office and railroad station, Hathorne (Boston & Maine).

Trustees : Samuel W. Hopkinson, Bradford, chairman ; Solon Bancroft, Reading, secretary ; Horace H. Atherton, E. Saugus ; Mrs. Ada T. Brewster, Andover ; George R. Jewett, Salem ; Miss Mary Ward Nichols, Danvers ; Orville F. Rogers, M.D., Boston.

Regular meeting, first Friday after first Monday of each month.

Superintendent, Chas. W. Page, M.D.

Senior assistant physician, H. W. Mitchell, M.D.

Assistant physicians, Henry A. Cotton, M.D., Mary Paulsell Mitchell, M.D., Earl E. Besse, M.D., Charles B. Sullivan, M.D., Henry M. Swift, M.D.

Assistant physician and pathologist, Elmer E. Southard, M.D.

Assistant physician at laboratory, Anna H. Peabody, M.D.

Treasurer, Warren A. Merrill.

Steward, John N. Lacey.

Visiting days, Mondays and Wednesdays.

WESTBOROUGH INSANE HOSPITAL (opened 1886) :—

Trustees : John L. Coffin, M.D., Northborough, chairman ; Miss Eliza C. Durfee, Fall River, secretary ; William Avery Carey, Boston ; Benjamin W. Childs, Worcester ; George B. Dewson, Cohasset ; Lewis R. Speare, Newton ; Miss Sarah B. Williams, Taunton.

Regular meeting, first Thursday of each month.

Superintendent, George S. Adams, M.D.

Assistant superintendent, Henry I. Klopp, M.D.

Assistant physicians, E. Ray Buhrman, M.D., William W. Coles, M.D., Ruth B. Coles, M.D., M. M. Jordan, M.D., Mary Johnson, M.D.

Pathologist, Solomon C. Fuller, M.D.

Treasurer, H. L. Davenport.

Steward, Melville L. Stacy.

Visiting days, every day except Saturdays, Sundays and holidays.

WORCESTER INSANE ASYLUM (opened 1877) :—

Trustees : trustees of Worcester Insane Hospital.

Superintendent, Ernest V. Scribner, M.D.

WORCESTER INSANE ASYLUM (opened 1877) — *Concluded.*

Assistant physicians, H. Louis Stick, M.D., Arthur E. Pattrell, M.D.,
William T. Hanson, M.D.

Pathologist, Frederick H. Baker, M.D.

Treasurer, Albert Wood.

Visiting days, every day except Sunday.

MEDFIELD INSANE ASYLUM (opened 1896) : —

Post-office, Harding ; railroad station, Medfield Junction (New York,
New Haven & Hartford).

Trustees : Ira G. Hersey, Hingham, chairman ; Miss Elizabeth
Thurber, Plymouth, secretary ; William O. Blaney, Boston ;
F. B. Lund, M.D., Boston ; Arthur A. Maxwell, Boston, Wm. H.
Morrison, Brockton ; Mrs. Sarah J. Rand, Newton Centre.

Regular meeting, first Thursday following the first Tuesday of each
month.

Superintendent, Edward French, M.D.

Assistant physicians, Lewis M. Walker, M.D., Ralph S. Wilder, M.D.,
Helen T. Cleaves, M.D., George A. Troxell, M.D.

Treasurer, Chas. C. Blaney.

Steward, John B. Chapin.

Visiting days, Tuesdays and Fridays.

STATE COLONY FOR THE INSANE, GARDNER (opened 1902) : —

Post-office, Gardner ; railroad station, East Gardner.

Trustees : Edmund A. Whitman, Cambridge, chairman ; Mrs.
Amie H. Coes, Worcester, secretary ; William H. Baker, M.D.,
Lynn ; John G. Blake, M.D., Boston ; George N. Harwood,
Barre ; Herbert B. Howard, M.D., Boston ; Mrs. Alice Miller
Spring, Fitchburg.

Regular meeting, last Thursday of each month.

Superintendent and Treasurer, Joseph B. Howland, M.D.

Assistant superintendent, Chas. E. Thompson, M.D.

Assistant physician, Wm. F. Farmer, M.D.

Visiting days, every day except Sundays and holidays, from 10 A.M.
to 4 P.M.

INSANE WARDS, STATE HOSPITAL (opened 1866) : —

Post-office, Tewksbury ; railroad stations, Tewksbury (Western Divi-
sion, Boston & Maine), Tewksbury Junction and Salem Junction
(Southern Division, Boston & Maine).

Trustees : Joseph A. Smart, Andover, chairman ; Rev. Payson W.
Lyman, Fall River, secretary ; Mrs. Sarah D. Fiske, Malden ;
Leonard Huntress, M.D., Lowell ; Emery M. Low, Brockton ;
Mrs. Anna F. Prescott, Boston ; John B. Tivnan, Salem.

Regular meeting, usually during last week of month, alternately at
State Hospital and State Farm.

INSANE WARDS, STATE HOSPITAL (opened 1866) — *Concluded.*

Superintendent, John H. Nichols, M.D.

Assistant superintendent and physician, Ernest B. Emerson, M.D.

First assistant physician, George A. Peirce, M.D.

Assistant physicians, Hannah Lowell Emerson, M.D., Howard F. Holmes, M.D., Walter C. Kenney, M.D., Carl J. Hedin, M.D., Freeman D. Bosworth, Jr., M.D.

Pathologist, Samuel R. Haythorn, M.D.

Visiting days, every day except Sundays and holidays, from 10 A.M. to 4 P.M.

STATE ASYLUM FOR INSANE CRIMINALS, STATE FARM (opened 1886, 1895) : —

Post-office, State Farm ; railroad station, Titicut (New York, New Haven & Hartford).

Trustees : trustees of State Hospital and State Farm.

Medical director, Chas. A. Drew, M.D.

Assistant physicians, Alfred Elliott, M.D., Leonard A. Baker, M.D.

Visiting days, every day except Sundays and holidays.

MASSACHUSETTS HOSPITAL FOR EPILEPTICS (opened 1898) : —

Post-office and railroad station, Palmer (Boston & Albany).

Trustees : William N. Bullard, M.D., Boston, chairman ; Charles A. Clough, Groton, secretary ; Winford N. Caldwell, Springfield ; Henry P. Jaques, M.D., Lenox ; Walter W. Scofield, M.D., Dalton ; Mrs. Mabel W. Stedman, Brookline ; Mrs. Mary P. Townsley, Springfield.

Regular meeting, first Thursday of each month.

Superintendent, Everett Flood, M.D.

Assistant physicians, Morgan B. Hodskins, M.D., Edward A. Kennedy, M.D., Alden V. Cooper, M.D.

Treasurer, Walter C. Lang.

Steward, Chas. F. Simonds.

Visiting days, Tuesdays and Fridays.

FOXBOROUGH STATE HOSPITAL (opened 1893) : —

Trustees : Frederick Fosdick, Fitchburg, chairman ; Mrs. Anna Phillips Williams, Boston, secretary ; Leroy S. Brown, Cambridge ; George L. Clemence, Southbridge ; John T. G. Nichols, M.D., Cambridge ; Samuel G. Webber, M.D., Boston ; Leonard Wheeler, M.D., Worcester.

Regular meeting, first Wednesday of each month.

Superintendent, Chas. E. Woodbury, M.D.

Senior assistant physician, Clarence J. Bell, M.D.

Junior assistant physician, Leslie E. Coffin, M.D.

Visiting days, Tuesdays and Fridays.

MASSACHUSETTS SCHOOL FOR THE FEEBLE-MINDED (opened 1848) :—

Post-office and railroad station, Waverley (Boston & Maine).

Trustees : William W. Swan, Brookline, president ; Frank G. Wheatley, M.D., North Abington, vice-president ; Chas. E. Ware, Fitchburg, secretary ; Chas. Francis Adams, 2d, Concord ; Francis J. Barnes, M.D., Cambridge ; Francis Bartlett, Boston ; Mrs. Luann L. Brackett, Newton ; Thomas W. Davis, Belmont ; Frederick P. Fish, Brookline ; Charles S. Hamlin, Boston ; Joseph B. Warner, Boston.

Quarterly meeting, second Thursday of October, January, April and July.

Superintendent, Walter E. Fernald, M.D.

Assistant physicians, G. L. Wallace, M.D., Joseph H. Ladd, M.D., G. S. Bliss, M.D., Annie M. Wallace, M.D.

Treasurer, Richard C. Humphreys.

Visiting days, Wednesday, Thursday and Saturday afternoons.

NEW SCHOOL FOR THE FEEBLE-MINDED (established by acts of the Legislature of 1906, chapter 508) :—

Trustees : Albert L. Harwood, Newton, chairman ; Ellerton James, Nahant, secretary ; Mrs. Susanna Berry, Lynn ; Walter Channing, M.D., Brookline ; John J. Connor, Peabody ; Herbert Parsons, Greenfield ; Mrs. Mary Stewart Scott, Worcester.

THE HOSPITAL COTTAGES FOR CHILDREN, BALDWINVILLE (opened 1882) :—

President, H. S. Morley, Baldwinville ; clerk, Robert N. Wallis, Fitchburg.

Trustees appointed by the Governor : Chas. H. Allen, Boston ; David H. Coolidge, Boston ; Mrs. William W. Doherty, Boston ; Arthur H. Lowe, Fitchburg ; H. S. Morley, Baldwinville.

Trustees appointed by the corporation : John M. Bemis, M.D., Worcester ; Mrs. J. B. Case, Boston ; John D. Carson, Dalton ; Mrs. W. S. Clark, Worcester ; Homer Gage, M.D., Worcester ; Mrs. Edward L. Greene, Lancaster ; Mrs. A. M. Greenwood, Gardner ; Rev. J. S. Lemon, Gardner ; Mrs. Winslow S. Lincoln, Worcester ; Mrs. Geo. T. Plunkett, Hinsdale ; F. W. Russell, M.D., Winchendon ; F. S. Stone, Otter River ; Gilman Waite, Baldwinville ; Robert N. Wallis, Fitchburg ; Mrs. Sarah E. Whitin, Whitinsville.

Quarterly meeting, second Wednesday of October, January, April and July.

Superintendent, Hartstein W. Page, M.D.

Assistant physician, Mildred A. Libby, M.D.

Treasurer, George L. Clark.

Visiting days, every day except Sundays.

BOSTON INSANE HOSPITAL (opened 1839) :—

Women's department : post-office, Dorchester Center ; railroad station, Forest Hills. Men's department : post-office, Mattapan ; railroad station, Forest Hills (New York, New Haven & Hartford).

Trustees : George H. Sargent, Boston, chairman ; Mrs. Catharine L. Marion, Boston, secretary ; C. James Connelly, Boston ; Michael J. Jordan, Boston ; Mrs. Mary M. Morrison, Boston ; Michael S. Morton, Boston ; George A. Sanderson, Boston.

Regular meeting, at 64 Pemberton Square, Boston, second Thursday of each month.

Superintendent, William Noyes, M.D.

Assistant physicians, S. W. Crittenden, M.D., Geo. H. Maxfield, M.D., Mary E. Gill, M.D., F. X. Corr, M.D.

Steward, William E. Elton.

Visiting day, Wednesday, 2 to 4 P.M.

PRIVATE INSTITUTIONS.

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